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COVER LETTER

**
TO: Registration Section Division of Corporations
71 THURSTMONTS 111
SUBJECT: TINVESTMENTS C.C. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jerry Kahn
Name of Person
Firm/Company
10111 715+ 54,000
Address
M: : -
Midmi Beach Fl 33141 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
- 11.
Jerry Kahn at (305) 861-3606 Name of Person Area Code & Daytime Telephone Number
Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee U\$30.00 Filing Fee & Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

11 TUNESTU	-	
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appea la Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited Liability	Company were filed on 1	19 2007 and assigned
Florida document number L070000710	1	, ,
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company he	<u>re</u> :
The new name must be distinguishable and end with the v. "L.L.C."	words "Limited Liability Comp	any," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	4 <u>. 4</u>	
(Principal office address MUST BE A STREET AD	DRESS)	
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regregistered agent and/or the new registered office a		our records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	E	nter Florida street address
	City	, Florida Zin Code
	2.0	t · · · ·

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member **Title** Name Address Type of Action Remove Member Thotaus Rd Remove Remove Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
Dated	2-12-,2013
	Signature of a member or authorized representative of a member
	Jerry Kahn
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00

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