Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000062960 3)))



H150000629603ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: LAW OFFICE OF ALEXIS GONZALEZ, P.A.

Phone

Account Number : I20140000097 : (305)223-9999

Fax Number

: (305)223-1880

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ELIE NAIM INVESTMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

Mar. 12. 2015 10:50AM

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

No. 2712 P. 2/4

FILED

2015 MAR 12 PM 11: 41

SEURZ TARY OF STATE
TALLAHASSEE, FLORIDA

Elie Naim Investments, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Flonda Limited Liability Company)

The Articles of Organization for this Limited Liability Comp	pany were filed on Florida	and assigned
Florida document number L07000014885		
This amendment is submitted to amend the following:		
A. If amending name, enter the new pame of the limited	liability company here:	
The new name must be distinguishable and end with the words "Limited	d Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u>(S)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		is, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		lorida
	City	Zip Code

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 605, 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

Mar. 12. 2015 10:50AM

No. 2712 P. 3/4

. If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Joseph Dieppa	2 NE 40th St	■ Add
	_	Suite 304	□ Remove
		Miami, Florida 33137	
			□ Remove
			2015 HAR & 2 PH 11: 61  CALLAHOSSEE, PI. OF ALLAHOSSEE, PI. OF ALLAHOS
<del>-</del>			TRISTED CO
			□ Remove
			□ Remove
<del></del>			Add
			□ Rémove

Page 3 of 3

Filing Fee: \$25.00

2015 MAR 12 PM 11: 41

P. 4/4

No. 2712