

L07000048182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

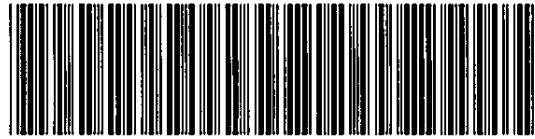
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07 JUL 10 PM 4:24

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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07 JUL 10 PM 4:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ari Investments, LLC
(Name of Limited Liability Company)

FILED
07 JUL 10 PM 4:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carlenea Jackson
(Name of Person)

Ari Investments
(Firm/Company)

PO Box 982
(Address)

Midway, FL 32343
(City/State and Zip Code)

For further information concerning this matter, please call:

Carlenea Jackson at (305) 762 2959
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
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

Ari Investments, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 7/10/07 and assigned
document number 207000048182.

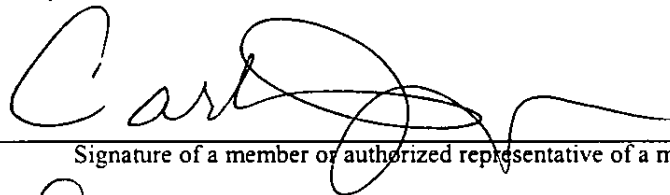
SECOND: This amendment is submitted to amend the following:

I would like to add
Charles Keaton Sr. as a
~~member~~ (Manager) to this
Cooperation.

Charles Keaton Sr (Mgr)
111 Morgan St.
Bainbridge, GA 39819

Dated

7/10/07



Signature of a member or authorized representative of a member

Carlina Jackson

Typed or printed name of signee

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07 JUL 10 PM 4:27
TALLAHASSEE, FLORIDA
SECRETARY OF STATE