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SECRETARY OF STATE

J. SAULSBERRY EXAMINER OCT 20 2010

COVER LETTER

~	ion Section of Corporations	
SUBJECT:	PPC INVESTMENTS, LLC. Name of Limited Liability Company	
	Name of Limited Liaolity Company	
The enclosed Artic	les of Amendment and fee(s) are submitted for filing.	
Please return all co	rrespondence concerning this matter to the following:	
	Charles C. Chow Name of Person	
	Charles C. Chow Name of Person Kim Yeung Ling, p. C. Firm/Company	
•	Phi (adelphia, pA 19/07 City/State and Zip Code Charles @ Kinking cpa. Net. E-mail address: (to be used for future annual report notification)	<i>‡</i> 3
	philadelphia, PA 19107	2010 77ALL
	City/State and Zip Code Charles @ Cin ling cfa. Net. E-mail address: (to be used for future annual report notification)	Z010 OCT 19 PM 12: 5 SECRETARY OF STATE TALLAHASSEE, FLORE
For further informa	ation concerning this matter, please call:	PAR STATE
_ char	Les Chow at (215) 922 - 2684 Area Code & Daytime Telephone Number) 12:57
Enclosed is a check	k for the following amount:	
\$25.00 Filing F	Certificate of Status Certified Copy Certificat (additional copy is enclosed) Certified	ite of Status &

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

PPL INVESTMENTS	, LLC.		
PPL INVESTMENTS (Name of the Limited Liability Compa) (A Florida Limited L	ny as it now appears (Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
PPL INVESTMENTS IN	ORLANDO		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company	/," the designation "Ll	LC" or the abbreviation
Enter new principal offices address, if applicable:	SA	ME D	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		20	9
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10 Changes	PHI2: 57
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	<u>·e</u> :		ne name of the new
Name of New Registered Agent:	No Chi	ange hange	
New Registered Office Address:		Lange r Florida street addr	
	Enter		ess
	City	, Florida	Zip Code
	Cuy		Lip 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 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 = M MGRM =	lanager Managing Member		
<u>Title</u>	Name	Address	Type of Action
	· · · · · · · · · · · · · · · · · · ·		Add Remove
		_/	Add Remove
	. N/P		Add Remove
	. /		Add Remove
			Add Remove
			Add Remove
D. If ame	nding any other information, ente	er change(s) here: (Attach additional sheets, if necess	FIL 2010 OCT 19 SECRETARY
- -			PHIZ: 57
Dated	Oct 14th	, <u>J010</u>	
	Signature of	a member or antiorized representative of a member	
		PANG, WAI KUEN Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00