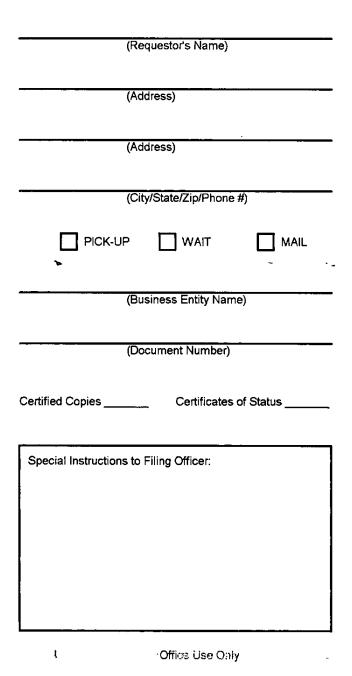
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SECRETARY OF STATE ONS
DIVISION OF CURPORATIONS

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Phone

COVER LETTER

Division of Corp		
Croom Inv	vestments, LLCf	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.	
Please return all correspon	ndence concerning this matter to the following:	
	F. Lorraine Jahn	
	Name of Person	
	Law Offices of F.L. Jahn, P.A.	
	Firm/Company	
	3409 W. Lemon Street	
	Address	
	Tampa, FL 33609	
	City/State and Zip Code	
	ljahn@fljlaw.com E-mail address: (to be used for future annual report notification)	
For further information co	oncerning this matter, please call:	
F. Lorraine Jahn		
Name of	T Person at () 514-6363 Area Code Daytime Telephone Number	
	·	
Enclosed is a check for the	ne following amount:	
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$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



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 25, 2014

F LORRAINE JAHN LAW OFFICES OF F L JAHN PA 3409 W LEMON STREET TAMPA, FL 33609

SUBJECT: CROOM INVESTMENTS, LLC

Ref. Number: L07000107485

We have received your document for CROOM INVESTMENTS, LLC and your check(s) totaling \$385.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 514A00025069

SECRETARY OF STATEMS DIVISION OF CORPORATIONS

THE CEIVED 14 DEC 10 AN IO: 00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Croom Investments, LLC (Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L07000107485</u>	were filed on 10/23/2007	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3409 W. Lemon Street	1 DIV
(Principal office address MUST BE A STREET ADDRESS)	Tampa, FL 33609	ISIO
		C
Enter new mailing address, if applicable:	3409 W. Lemon Street	NEU RY OF S CORPOR
(Mailing address MAY BE A POST OFFICE BOX)	Tampa, FL 33609	L: 39
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:		er the name of the new
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Florida	
	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

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	Jack S., Hamilton, Jr.	311 N Newport Avenue	□ Add
		Tampa, FL 33606	■ Remove
Mgr	Jack S. Hamilton, Jr.	3409 W. Lemon Street	
	•	Tampa, FI 33609	☐ Remove
			□ Add
			□ Remove
			SECKE FAR DIVISION OF C
			O EN 4:39
			□ Remove
			Add
			□ Remove

If amending any other information, enter ch	<pre>ange(s) here: (Attach additional sheets, if necessary.)</pre>
•	
Effective date, if other than the date of filing	:(optional)
(The effective date must be specific, cannot be prior to date the date this document is filed by the Florida Department	e of receipt or filed date and cannot be more than 90 days after
Dated December 5	2014
1. Forsa	me Tol
F. Lorraine Jahn	nember or authorized representative of a member Typed or plinted name of signee

Page 3 of 3

Filing Fee: \$25.00

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