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COVER LETTER

TO:	Registration Section Division of Corporations	
SURJE	ECT: Bolan Investment Group, LLC	
JOEGI	(Name of Limited Liability Company)	
The en	nclosed Articles of Amendment and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	Abdul Waheed Baloch	
	(Name of Person)	97
	Bolan Investment Group, LLC	麗 岛
	(Firm/Company)	題言書
	20622 Great Laurel Avenue	PILED OT DEC 17 AM 11: 26 SECRETARY OF STATE TALLAHASSEE FLOADS
	(Address)	FLOREST N. 2
	Tampa, FL 33647	最高が
	(City/State and Zip Code)	
For fur	rther information concerning this matter, please call:	
Abdu	ul Waheed Baloch at (571) 216-7730	
	(Name of Person) (Area Code & Daytime Telephone Number)	
Enclose	sed is a check for the following amount:	
\$25	5.00 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	f 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

Bolan Investment Group, LLC (Name of the Limited Lia (A Flo	bility Company as it now appears on ou rida Limited Liability Company)	r reçords.)
The Articles of Organization for this Limited Liabil	lity Company were filed on 12/07/20	07 and assigned
Florida document number <u>L07000122101</u>	·	
This amendment is submitted to amend the following	ng:	97
A. If amending name, enter the new name of the	e limited liability company here:	OT DEC 17 SECRETARIANS
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the	e designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office	•	cords, enter the name of the new
Name of New Registered Agent:		
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 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Address Type of Action Title** <u>Name</u> 20622 Great Laurel Avenue Tampa, FL 33647 Shahida Waheed MGRM Add Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2007 Dated December 14 Signature of a member of authorized representative of a member

Page 2 of 2

Abdul Waheed Baloch

Filing Fee: \$25.00

Typed or printed name of signee