

L 08000006406 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000242891420

12/31/12--01042--010 **25.00

FILED

12 DEC 31 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JAN - 3 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SPLENDID INVESTORS, LLC.**

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

SALOMON YUKEN

Name of Person

SPLENDID INVESTORS, LLC.

Firm/Company

1023 N.W. 3 AVENUE

Address

MIAMI, FLORIDA 33136

City/State and Zip Code

SY@PRESTIGEENTGROUP.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SALOMON YUKEN

Name of Person

at **(786) 236-1725**

Area Code & Daytime Telephone Number

FILED
12 DEC 31 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SPLENDID INVESTORS, LLC.

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

The Articles of Organization for this Limited Liability Company were filed on 01/17/2008 and assigned
Florida document number L08000006406.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1023 N.W. 3 AVENUE
MIAMI, FLORIDA 33136

FILED
12 DEC 31 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

1023 N.W. 3 AVENUE

Enter Florida street address

MIAMI

, Florida 33136

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

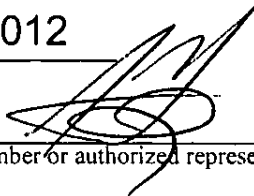
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	S & R INVESTMENT, LLC.	1401 PONCE DE LEON BLVD. #401	<input type="checkbox"/> Add
		CORAL GABLES, FLORIDA 33134	<input checked="" type="checkbox"/> Remove
MGR	S & R INVESTMENT, LLC.	1023 N.W. 3 AVENUE	<input checked="" type="checkbox"/> Add
		MIAMI, FLORIDA 33136	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 12 DEC 31 PM 3:24
 FILED

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated DECEMBER 29, 2012



Signature of a member or authorized representative of a member

SALOMON YUKEN

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED

12 DEC 31 PM 3:24

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**