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EXAMINER



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38 MAY -2 PH 1:59

DIVISION OF CORFORATION

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: America Investment Consultants, 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:
Arthur S Li (Name of Person)
(Firm/Company)
2401 Albion Ave (Address)
2401 Albion Ave (Address) Orlando, FL 32828 (City/State and Zip Code)
For further information concerning this matter, please call:
Arthur S Li at (401) 568 2208 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$ Certificate of Status \$55.00 Filing Fee & Certificate of Status \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

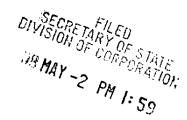
MAILING ADDRESS:

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



America In. (Name of the Limited	vestment Corbu Liability Company as it now apper Florida Limited Liability Company	1 tants, LLC ears on our records.)
The Articles of Organization for this Limited Li	ability Company were filed on _	
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company h	nere:
The new name must be distinguishable and end with "L.L.C."	h the words "Limited Liability Com	npany," the designation "LLC" or the abbreviation
B. If amending the registered agent and/or the new registered of		n our records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		(Enter Florida street address)
		, Florida

New Registered Agent's Signature, if changing Registered Agent:

ř

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 Member's 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 **Title** <u>Name</u> **Address Type of Action** MGRM ☐ Add Remove MGRM ☐ Add Remove Add Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00