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08 APR -9 PH 2: 04

J. BRYAN

APR 1 0 2008

EXAMINER

COVER LETTER

TO: Registration : Division of C		
SUBJECT: 166	(Name of Limited Liability Company)	
The enclosed Articles of	of Amendment and fee(s) are submitted for filing.	
Please return all corresp	pondence concerning this matter to the following:	
	DEBORAH BORONELL (Name of Person)	
	TIGER ONE INVESTMENTS LLC (Firm/Company)	
	1412 AVLEIGH GR (Address) ORLANDO FL 32824	UNISION O
	ORLANDO FL 32824 (City/State and Zip Code)	-9 FE
For further information	concerning this matter, please call:	OF STATE OF
<u> ДЕВОРАН</u> В	PORONELL at (407), 913 - 2010 (Area Code & Daytime Telephone Number)	
Enclosed is a check for	the 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) Certified Copy (additional copy is enclosed)	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

11GER UNE WYEST	MENTS LLC		
(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now apported Limited Liability Company	ears on our records.)	
	w. a	3-6-08	. 4
The Articles of Organization for this Limited Liabi			and assigned
Florida document number L080000133	<u>16</u> .		ASION OF THE PROPERTY OF THE P
This amendment is submitted to amend the following	ng:		OB APR -9 PH 2: 0
A. If amending name, enter the new name of the	e limited liability company b	<u>nere</u> :	A 2: 0
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Con	npany," the designation "	LLC" or the abbreviation
Name of New Registered Agent: New Registered Office Address:		(Enter Florida street ac	ldress)
-	(City)	, Florida	(Zip Code)
New Registered Agent's Signature, if changing Regi	stered Agent:		
I hereby accept the appointment as registered ay the provisions of all statutes relative to the prop accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	er and complete performand ed agent as provided for in istered office address, I here	ce of my duties, and I Chapter 608, F.S. Or,	am familiar with and , if this document is
	Urch	A A Ci A A NI T	Posistanad Agast

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>	Address	Type of Action
<u>MGRM</u>	ANDRE BOPONELL	PO BOX 3317 HARKER HEIGHTS TX 76548	Add Remove
			Add Remove
	<u> </u>		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ng any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	_
			SCRETARY OF STATEONS WYSSION OF CORPORATIONS 08 APR -9 PM 2: 04
Dated APP	11 7 2008 France	 U	- 4 X
-	DEBORAH E	or authorized representative of a member OFONELL or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00