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M. Thomas APR 2 5 2008

M. Wromes ADD of cono

COVER LETTER *

TO: Registration S Division of Co		
SUBJECT:	AAN INVESTMENTS LLC	
	(Name of Limited Liability Company)	
The enclosed Articles of	f Amendment and fee(s) are submitted for filing.	
Please return all corresp	condence concerning this matter to the following:	
	SAM I. HATOVM	
	(Name of Person)	
	AAN INVESTMENTS LLC	***************************************
	(Firm/Company)	e .
	1969 SOUTH ALAFAYA THAIL,	#137 BARA 24 MIN. 36 FALED AND STATE AND
	(Audiess)	是 日
	ORLANDO, FLURIDA 32828 (City/State and Zip Code)	
	(City/State and Zip Code)	Page 1
For further information	concerning this matter, please call:	※ 資訊 あ
	of Person) at (407) 765-636 (Area Code & Daytime	Telephone Number)
Enclosed is a check for	the following amount:	
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 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

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

AAN INVESTMENT (Name of the Limited Li	TS LLC ability Company as it now appears on our record orida Limited Liability Company)	<u>s.</u>)
(A FI	orida Limited Liability Company)	
The Articles of Organization for this Limited Liab	ility Company were filed on3/6/2008	and assigned
Florida document number _ L Ø 8 Ø Ø Ø Ø 24 3 G	<u>04</u> .	
This amendment is submitted to amond the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	\$4 B
The new name must be distinguishable and end with t	he words "Limited Liability Company," the designa	tion "LLC" be the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, <u>e</u> e address here:	nter the name of the few
	1,11	7
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
· · · · · · · · · · · · · · · · · · ·	(Enter Florida street address)	
	. Florida	
•	(City)	(Zip Code)
	,	, <i>'</i>
New Registered Agent's Signature, if changing Reg	istered 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 <u>Title</u> **Name** MGR SAM N. HATOUM SR. 2261 CHRISTINE DR. ☐ Add TITUSVILLE, FL Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) APAIL Dated _ 2008 Signature of a member or authorized representative of a member

Page 2 of 2

I. HATOVM JR.
Typed or printed name of signee

Filing Fee: \$25.00