Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000242872 3)))



H080002428723ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617 6383

From:

Account Name : ROTHMAN & TOBIN, P.A.

Account Number : I20000000031

Phone : (305)895-3225 Fax Number : (305)895-7175

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

SIX POINTS INVESTMENT GROUP, LLC

N 12: 28 PLORIDA	Certificate of Status	U
	Certified Copy	0
	Page Count	03
	Estimated Charge	\$25.00

Corporate Filing Menu

S. HAWKES

OCT 27 2008

EXAMINER

H08000242872 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Six Points Investment Group, LLC					<u>E.S.</u>	E, '	N. Maria
(Name of the Limited Li (A Fi	bility Company orida Limited Li	y as it now as ability Comp	ppears on our r any)	records.)		ري	4 . 2 . 4
·	•				(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
The Articles of Organization for this Limited Liab	lity Company v	were filed on	October 21, 2	2008	and a	ssigned-	· , , ,
Florida document number L08000098930	,				T.	ع المانية المسرورية المرابعة الما	بږ دن
					Ę.	Art To the	7
This amendment is submitted to amend the following	ng:					``}** .	
A. If amending name, enter the new name of th	e limited liabi	litý compan	y here:				
The new name must be distinguishable and end with the "L.L.C."	e words "Limit	ed Liability C	Company," the d	esignation "	LLC" or the	abbrovi	iation
Enter new principal offices address, if applicable	e:						
(Principal office address MUST BE A STREET	(DDRESS)						
Enter new mailing address, if applicable:							
(Mailing address MAY BE A POST OFFICE BO	<u>x</u> 2						
	·						
B. If amending the registered agent and/or registered agent and/or the new registered office			on our recoi	rds, <u>enter</u>	the name	of the	new
Name of New Registered Agent:			<u> </u>				_
New Registered Office Address:	New Registered Office Address:						
			(Enter Florida street address)				
		, Florida					
		(City)			(Zip C	ode)	
New Registered Agent's Signature, if changing Reg	stored Agent:						
I hereby accept the appointment as registered a the provisions of all statutes relative to the pro- accept the obligations of my position as registe being filed to merely reflect a change in the reg company has been notified in writing of this ch	per and completed agent as printed agent as printed office	ete perform rovided for	ance of my du in Chapter 60	itles, and I 98, F.S. Or	am famili , if this do	ar with cument	and
	(If Changing Registered Agent, Signature of New Registered Agent)						•
	Page J	of 2			H08000	242872	2 3

H08000242872 3

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 = Ma MGRM = N	nager Annaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	Jonathan Candlotti	2738 Meadowood Drive Weston, FL 33332	Add
MGRM_	Alan Covitz	2732 Meadowood Drive Weston, FL 33322	Add Remove
			Add Remove
			Add Romove
·			Add Remove
			Add Remove
D. If amen	iding any other information, enter e	hange(s) here: (Attach additional sheets, if necessary,	21 M 8 34
-			
Dated	10-24-08	2	•
	Alan Covitz	ember or authorized representative of a member	
	•	- AA'	

Page 2 of 2

Filing Fee: \$25.00