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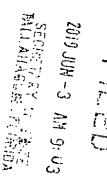
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COVER LETTER

SUBJECT:	EVENTUS	INVESTMENT PARTNERS	LLC		
		Name of Lim	ited Liability Company		
The enclosed	l Articles of A	amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspon	dence concerning this matter	to the following:		
		ROMAN FISHER			
			Name of Person		
		EVENTUS INVESTMEN	T PARTNERS LLC		
Firm/Company					
3100 N. OCEAN BLVD. APT. 806					
			Address		
City/State and Zip Code					
romanfisher@gmail.com					
		E-mail address: (to be used for future annual report notific	cation)	
For further in	nformation co	ncerning this matter, please ca	all:		
ROMAN	FISHE	₹	gr (954) 414-1534		
Name of Person		Person	at (954) 414-1534 Area Code Daytime	Telephone Number	
Enclosed is a	check for the	following amount:			
≘ \$25.00 F	iling 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:

TO:

Registration Section Division of Corporations

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

EVENTUS INVESTMENT PARTNERS 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 ______JANUARY 8, 2009 and assigned Florida document number _____LO9000002158 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 3100 N. OCEAN BLVD. SUITE 806 Enter new principal offices address, if applicable: FORT LAUDERDALE FLORIDA 33308 (Principal office address MUST BE A STREET ADDRESS) 3100 N. OCEAN BLVD, SUITE 806 Enter new mailing address, if applicable: FORT LAUDERDALE FLORIDA 33308 (Mailing address MAY BE A POST OFFICE BOX) 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: ROMAN FISHER Name of New Registered Agent:

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

New Registered Office Address:

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 605, 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.

FORT LAUDERDALE

3100 N. OCEAN BLVD, SUITE 806

If Changing Registered Agent, Menature of New Registered Agent

Enter Florida street address

, **Florid**a _____

or removed from our records: 'MGR = Manager **AMBR** = **Authorized Member** <u>Title</u> Name **Address Type of Action** □ Add ☐ Remove ☐ Change ☐ Remove ☐ Change □ Add □ Remove ر الشرك Change □ Add □ Remove □ Change □ Add ☐ Remove ☐ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

D. If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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E. Effect	ive date, if other than the date of filing: (optional)	
Note:	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list nent's effective date on the Department of State's records.	
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies 90th day after the record is filed.	er of:
Dated	JUNE 1	
	Signature of a member or authorized representative of a member	
	ROMAN FISHER	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00