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(Re	equestor's Name)	,	
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T. CLINE

AUG 24 2009

EXAMINER

COVER LETTER

10.	Division of Cor				
SUBJE	СТ:		nvestment Partners L	LC	
		Name of Limi	ted Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sul	omitted for filing.		·
Please r	eturn all correspo	endence concerning this matter	to the following:		
		Chri	stopher T. Graham, Esq.		
•			Name of Person		
		The	Private Client Law Group		
			Firm/Company		
		75 Fourt	eenth Street N.E. Suite 2	2710	
			Address		7
			Atlanta, GA 30309		2009 AUG 2 SEERETAR
			City/State and Zip Code		H
		E-mail address: (ograham@tpclg.com to be used for future annual report no	otification)	
For furt	her information c	concerning this matter, please of	all:		PM 12:
	David I	H. Durham, Esq.	at (_404_)	924-4280	29
	Name o	f Person	Area Code & Day	time Telephone Number	
	•				
Enclose	ed is a check for the	he following amount:			
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	sed) Certified	te of Status &
	Registr Division P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Treasure C	oast Investment Partn	ers LLC		
(Name of the Limited Li (A Fl	ability Company as it now appea orida Limited Liability Company)	ars on our records.)		
The Articles of Organization for this Limited Liab	ility Company were filed on	March 6, 2009	and assign	ed
Florida document number L090000223	77 .			
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of th	e limited liability company he	ere:		
				
The new name must be distinguishable and end with to "L.L.C."	he words "Limited Liability Comp	pany," the designation "LL	C" or the abbr	reviation
Enter new principal offices address, if applicab	le:	A	7099 SEE	
(Principal office address MUST BE A STREET A	ADDRESS)	SS WHY	A AUG	·- t- [
·		<u> </u>	A 2	g g
			F 72	\$ 4 - 4 B
Enter new mailing address, if applicable:			<u> </u>	antena Pa B
(Mailing address MAY BE A POST OFFICE BO	<u></u>		<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered offic		our records, enter the	a name of t	<u>he new</u>
Name of New Registered Agent:		,		
New Registered Office Address:				
	Enter Florida street address			
	Cit.	, Florida	7:- Code	
	City		Zip Code	

New Registered Agent's Signature, if changing Registered 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

Ramending 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
MGRM	Stephen F. Been	4413 SE Mulford Lane Stuart, FL 34997	Add ✓ Remove
MGRM_	SFB Investment, LP	6000 Lake Forrest Drive Suite 325 Atlanta, GA 30328	✓ Add Remove
			Add Remove
			Add Remove
			Remove
D. If amend	ing any other information, enter cl	hange(s) here: (Attach additional sheets, if necessa	iry.)
 Dated	As of March 6	, 2009	
	Signature of a me	ember of authorized representative of a member	
	Chr T	ristopher T. Graham, Esq. yped or printed name of signee	
		7 pea or printed name or signee	

Page 2 of 2

Filing Fee: \$25.00