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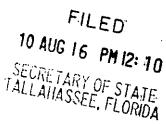
COVER LETTER

TO:	Registration S Division of Co			•
SUBJI	ECT:	ZQN inv	vestments LLC	
		Name of Limi	ted Liability Company	
The en	closed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please	return all corresp	ondence concerning this matter	to the following:	
			Anna Ellen Chantler	
			Name of Person	
2		z	QN Investments LLC	
Firm/Company				
		5	5850 3rd St PMB 238	
			Address	
		L	os Angeles CA 90036	
			City/State and Zip Code	
		ellend E-mail address: (chantler@slingshot.co.nz to be used for future annual report notifice	ation)
For fu	rther information	concerning this matter, please of	eall:	
	Anna	a Ellen Chantler	at (+64) 27	2 416887
	Name	of Person	Area Code & Daytime	Telephone Number
Enclos	ed is a check for	the following amount:		
₹ \$2:	5.00 Filing 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)
	Regis	LING ADDRESS: tration Section ion of Corporations	STREET/COURIE Registration Section Division of Corporat	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Z	QN Investments LLC		~~~
(Name of the Limited Li (A F	ability Company as it now appea orida Limited Liability Company)	urs on our records.)	
The Articles of Organization for this Limited Liab	ility Company were filed on	April 28 2009	and assigned
Florida document numberL09000409	93		
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	ne limited liability company he	re:	
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Comp	eany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BC			
B. If amending the registered agent and/or registered agent and/or the new registered offic		our records, <u>enter t</u> l	ne name of the new
Name of New Registered Agent:			and the state of t
New Registered Office Address:	Ei	nter Florida street addi	£22
		, Florida	
	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

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>	<u>Address</u>	Type of Action
MGRM	JET Property Trust	5850 3rd St PMB 238 Los Angeles CA 90036	☐ Add ✓ Remove
MGRM_	Anna Ellen Chantler	5850 3rd St PMB 238 Los Angeles CA 90036	✓ Add Remove
	· 		Add Remove
			Add Remove
			Add ☐ Remove
			□D omovo
D. If amen	ding any other information,	enter change(s) here: (Attach additional sheet	s, if necessary.)
 			FILED 10 AUG 16 PM 12: 10 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Dated	August 10		DE 10
		45	nhar
		Anna Ellen Chantler	
		Typed or printed name of signee	

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Filing Fee: \$25.00