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Office Use Only



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FILED

SECRETARY OF STATE

SECRETARY OF STATE

M. THOMAS
JUL 7 2009
EXAMINER

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:		R INVESTMENTS, LLC	· · · · · · · · · · · · · · · · · · ·
	f Amendment and fee(s) are sub		
•	- -		
		SAMEH S. IBRAHIM Name of Person	
		. Canada and a can	
Firm/Company			
	59	16 NW 54TH CIRCLE	
		Address	
	COR	RAL SPRINGS, FL 33067	SECRETARY OF STATE ALLAHASSEE, FLORID 44 6432
	,	City/State and Zip Code	
	SAM	IBRAM1@YAHOO.COM to be used for future annual report notific	ation)
For further information	concerning this matter, please of	•	西里
Torrester information	concerning and matter, preuse c		STA STA
	EH S. IBRAHIM	at (· · ·)	
Name	of Person	Area Code & Daytime	Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 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 Divis	LING ADDRESS: tration Section ion of Corporations Box 6327	STREET/COURIE Registration Section Division of Corpora Clifton Building	
Tallahassee, FL 32314		2661 Executive Cen	ter Circle

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE REDEEM	<u>ER INVESTMENT</u>	S, LCC
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appea Limited Liability Company)	ers on our records.
The Articles of Organization for this Limited Liability C Florida document numberL09000053224		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company he	<u>re</u> :
The new name must be distinguishable and end with the wo	rds "Limited Liability Come	pany," the designation "LLC" or the abbreviation
"L.L.C."	- 	
Enter new principal offices address, if applicable:		Tog & T
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SEE. FLORIDA
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	nter Florida street address	
		, 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>	Name	Address	Type of Action
MGRM	CAROLINE A. SEDKY	5916 NW 54TH CIRCLE CORAL SPRINGS, FL 33067	Add Remove
			Add Remove
			Add Remove
			Add Py
	-		A SEP Add Remove
			BANG STORY
D. If amend	ding any other information, enter	change(s) here: (Attach additional sheets, if necess	ary.)
Dated	JUNE 29TH	2009	
	Signature of a r	member or authorized representative of a member	
		SAMEH S. IBRAHIM	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00