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2010 MAR 29 AH 11: 20
SECRETARY OF STATE
ALAHASSEE. FLORIDA

T. CLINE

MAR 30 2010

EXAMINER

104-55935

COVER LETTER

TO: Registration Section Division of Corporations		12	
SUBJECT: Cupey Investment Name of Limit	tted Liability Company		
The enclosed Articles of Amendment and fee(s) are sub	mitted for filing	• ***	
The enclosed Articles of Amendment and fee(s) are sub	onitied for filling.		
Please return all correspondence concerning this matter	to the following:		
Nevis 1	Lernandez Name of Person		
	Name of Person	•	
Rupey In	vestment LL C	1 = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 =	
308 taups	on Dr Apt #1	IO HAR Z	MARKET P
	radios	ASSI	
Cape Cora	City/State and Zip Code	OF STATE	()
Michael Bo	City/State and Zip Code Oxio 3 3 90 4 to be used for future annual report notificat	o Con OR ST	
For further information concerning this matter, please c			
Nevis Fernandez	at (239) 265 43		
Name of Person	Area Code & Daytime To	elephone Number	
Enclosed is a check for the following amount:			
\$25.00 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:

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

. <u>Cuper Inves</u>	Tment LLC		
(<u>Namé of the Limited Lia</u> (A Flo	bility Company as it now appears or it all company)	<u>n our records.</u>)	
The Articles of Organization for this Limited Liabil Florida document number March 26	lity Company were filed on <u>Ha</u>	rch 262066 and assigned	
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company here:	•	
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Company,	"the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable	<u> </u>		
(Principal office address MUST BE A STREET A	DDRESS)	7A SEC	
Enter new mailing address, if applicable:		MAR 29 CRETARY LAHASSE	
(Mailing address MAY BE A POST OFFICE BO.	<u></u>		
		STATE LORID	
B. If amending the registered agent and/or registered agent and/or the new registered office		>	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter	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

Type of Action Name <u>Address</u> Midlel Borjas □ Add 77 ⊀emove ☐ Add Remove ☐ Add ☐ Remove Add Remove Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated_ Signature of a member or authorized representative of a member Wevis Fernandez
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00