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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS
DEC 18 2009
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Alcontrario Investments, LLC.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jorge Salcedo H, Esq.

Name of Person

JSH Register Agent Services, Inc.

Firm/Company

200 South Biscayne Boulevard, #4650

Address

Miami, Florida 33131

City/State and Zip Code

JSalcedo@LawJSH.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jorge Salcedo H, Esq.

Name of Person

at (305) 777-2681

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Alcontrario Investments, 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 7/21/2009 and assigned
Florida document number L09000069688.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

7209 Southwest 59 Avenue

South Miami, Florida 33143

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7209 Southwest 59 Avenue

South Miami, Florida 33143

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TALLAHASSEE, FLORIDA

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:

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Malek Torbay	7209 Southwest 59 Avenue South Miami, Florida 33143	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Henry Torbay	7209 Southwest 59 Avenue South Miami, Florida 33143	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Jorge Salcedo H	7209 Southwest 59 Avenue South Miami, Florida 33143	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary)*

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 DEC 17 AM 11:23

FILED

Dated December 16, 2009


Signature of a member or authorized representative of a member

Jorge Salcedo

Typed or printed name of signee