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S. HAWKES

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EXAMINER

COVER LETTER

TO: Registration Division of C						
SUBJECT:	AFFINITY IN	NVESTMENTS, LLC				
SUBJECT:		ited Liability Company				
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:						
		BRITT NAPIER				
		Name of Person				
	Firm/Company					
	444 N. FARING RD					
		Address				
		S ANGELES, CA 90077 City/State and Zip Code				
	br E-mail address: (itt_napier@yahoo.com to be used for future annual report notifica	tion)			
For further information concerning this matter, please call:						
	RITT NAPIER	at (310) 63 Area Code & Daytime T	23-0963			
Name	e of Person	Area Code & Daytime i	elephone 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)			
Regi Divi P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 shassee, FL 32314	STREET/COURIEI Registration Section Division of Corporati Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AFFINITY INVES	SIMENIS, LL	<u> </u>		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company Florida document numberL0900087796	were filed on	A TI		
This amendment is submitted to amend the following:		LED 5 PM 12: 4:3 ASSEE, FLORIE		
A. If amending name, enter the new name of the limited liab	<u>ility company here</u>	107		
MOZIDO INVEST	TMENTS, LLC	BET 3		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compan	y," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	new principal offices address, if applicable: 4316 SUMMIT CREEK BLVD #3104			
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL	. 32837		
Enter new mailing address, if applicable:	444 N. FARING	G RD		
		S, CA 90077		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	<u>e</u> :	r records, enter the name of the nev		
	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>	Address	Type of Action
MGR	Michael A. Liberty	245 Commercial Street, STE 401 Portland, ME 04101	Add Remove
MGR	Brittany S. Abbass	3110 Green Dolphin Ln Naples, FL 34102	Adding Remove PR 2: 13
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t oralla dia an			Add Remove
			Add
***************************************	4 		Add Remove
D. If amen	nding any other information	n, enter change(s) here: (Attach additional sheets, if necessa	iry.)
<u>-</u>			
Dated	MARCH 1		
	Signatu	re of a member or authorized representative of a member	
		BRITTANY S. ABBASS	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00