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SECRETARY OF STATE
ALLAHASSEE FIGURE

D. BRUCE

JAN 11 2010

**EXAMINER** 

## **COVER LETTER**

TO: // Registrat Division o	ion Section of Corporations		
SUBJECT:	RBK CAPITAL	INVESTMENTS, LLC	
		nited Liability Company	<del>-</del>
The enclosed Artic	les of Amendment and fee(s) are su	abmitted for filing.	
Please return all co	rrespondence concerning this matte	er to the following:	
		LARRY HERRING	_
		Name of Person	
	RBK CA	APITAL INVESTMENTS, LLC	
	<del></del>	Firm/Company	_
	611 NORT	TH WYMORE ROAD, SUITE 100	
		Address	_
	\\/\	INTER PARK, FL 32789	F
		City/State and Zip Code	- ([,
	INF	O@HERRINGCPA.COM	AHA AAN
	E-mail address:	(to be used for future annual report notification)	JAN -8 PM CRETARY OF AHASSEE, F
For further informa	ation concerning this matter, please	call:	
F	RICHARD PEARCE	at ( 407 ) 647-7777	PH 1: 01
	Name of Person	Area Code & Daytime Telephone Num	ber Dm 2
Enclosed is a check	k for the following amount:		
\$25.00 Filing F	Cee \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certif	Filing Fee, icate of Status & ied Copy ional copy is enclosed)
۲,			
] ] ]	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, 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

RBK agrital Investments, LLC

(Name of the Limited/Liability Company as it now appears of our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liabil Florida document number	• •	09/21/2009	and assigned	
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	limited liability company her	<u>·e</u> :		
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Compa	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable	::			
(Principal office address MUST BE A STREET A	DDRESS)		5	
	<u></u>			
·				
Enter new mailing address, if applicable:			SS &	
(Mailing address MAY BE A POST OFFICE BO.	<u> </u>			
			S - D	
		, A PC	2 0	
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	En	Enter Florida street address		
		, Florida		
<del>-</del>	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 = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	George Frederik Du Preez	8944 Via Bella Notte Orlando, Florida 32836	Add Remove
MBR	Timothy Castracane	229 Carolina Street Saratoga Springs, NY 12866	✓ Add  ———— Remove
			Add Remove
			Add Remove
			Add Remove
***************************************	<del></del>		Add Remove
D. If amen	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necess	
			FIL 10 JAN -8 LEGRETARY C LLAHASSEE
	JANUARY S 2	>10	PH 1:01
Dated	Lan	er or anthorized representative of a member	
	_ La	rry J. Herring, CPA d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00