# 19900099440

| (Requestor's Name)                                  |
|-----------------------------------------------------|
| (Address)                                           |
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| (City/State/Zip/Phone #)                            |
| PICK-UP WAIT MAIL                                   |
| (Business Entity Name)                              |
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### **COVER LETTER**

TO:

| то:                                                                                                | Registration<br>Division of C |                                                  |                                                             |                                                                                          |  |
|----------------------------------------------------------------------------------------------------|-------------------------------|--------------------------------------------------|-------------------------------------------------------------|------------------------------------------------------------------------------------------|--|
| SUBJECT: SOMEBODY'S HERO INVESTMENT GROUP, LLC                                                     |                               |                                                  |                                                             |                                                                                          |  |
| 3000                                                                                               |                               |                                                  | nited Liability Company                                     |                                                                                          |  |
|                                                                                                    |                               |                                                  |                                                             |                                                                                          |  |
| The er                                                                                             | nclosed Articles              | of Amendment and fee(s) are su                   | bmitted for filing.                                         |                                                                                          |  |
| Please                                                                                             | return all corres             | spondence concerning this matte                  | er to the following:                                        |                                                                                          |  |
|                                                                                                    |                               | RAUL E. ESPINOZA                                 |                                                             |                                                                                          |  |
|                                                                                                    |                               |                                                  | Name of Person                                              |                                                                                          |  |
| R                                                                                                  |                               | AUL E. ESPINOZA, P.L                             |                                                             |                                                                                          |  |
|                                                                                                    |                               | Firm/Company                                     |                                                             |                                                                                          |  |
| 175 SW 7 S                                                                                         |                               |                                                  | SW 7 STREET, SUITE 1                                        | 806                                                                                      |  |
| Address                                                                                            |                               |                                                  |                                                             |                                                                                          |  |
| MIAMI, FLORIDA 33130  City/State and Zip Code                                                      |                               |                                                  |                                                             |                                                                                          |  |
|                                                                                                    |                               |                                                  |                                                             |                                                                                          |  |
| RESPINO                                                                                            |                               |                                                  | PINOZA@REPALAW.Co                                           | OM                                                                                       |  |
| r. r                                                                                               | A. S. Francisco               |                                                  | •                                                           | (notification)                                                                           |  |
| For Iu                                                                                             | rther information             | n concerning this matter, please                 | can:                                                        |                                                                                          |  |
| _                                                                                                  |                               | JL E. ESPINOZA                                   | at (_786_)                                                  | 539-5410                                                                                 |  |
| Name of Person                                                                                     |                               | Area Code & Daytime Telephone Number             |                                                             |                                                                                          |  |
| Enclos                                                                                             | sed is a check fo             | r the following amount:                          |                                                             |                                                                                          |  |
| \$2.                                                                                               | 5.00 Filing Fee               | \$30.00 Filing Fee & Certificate of Status       | \$55.00 Filing Fee & Certified Copy (additional copy is enc | \$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 |                               | Registration S<br>Division of C<br>Clifton Build | orporations                                                 |                                                                                          |  |

Tallahassee, FL 32301

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## SOMEBODY'S HERO INVESTMENT GROUP, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

10/14/2009 The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_ and assigned Florida document number \_\_\_\_ L09000099440 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: 175 SW 7 STREET (Principal office address MUST BE A STREET ADDRESS) **SUITE 1806** MIAMI, FLORIDA 33130 175 SW 7 STREET Enter new mailing address, if applicable: **SUITE 1806** (Mailing address MAY BE A POST OFFICE BOX) MIAMI, FLORIDA 33130 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: 175 SW 7 STREET, SUITE 1806 New Registered Office Address: Enter Florida street address , Florida 33130 Zip Code MIAMI City

#### 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 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>Address</u> **Type of Action Title** <u>Name</u> ☐ Add Remove ☐ Add Remove ☐ Add Remove ∏Add Remove □Add Remove  $\prod$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) NOVEMBER 2011 ized representative of a member RAUL E ESPINOZA Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00