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B. KOHR

OCT 2 7 2009

EXAMINER

COVER LETTER

	on of Corporations		
SUBJECT: _	MOUSA IN	NVESTMENT, LLC	
	Name of Lim	nited Liability Company	
The enclosed A	articles of Amendment and fee(s) are su	abmitted for filing.	
Please return a	Il correspondence concerning this matte	er to the following:	09 OCT 26 MM, 8: 24
		MIRA ZAKI Name of Person	C7 25
		Name of Person	Z OF
	HANN	NA ZAKI & COMPANY, LLC	6 M. 8: 24
		Firm/Company	24
		7777 NW 146TH ST	
	· · · · · · · · · · · · · · · · · · ·	Address	
	М	IIAMI LAKES, FL 33016	
		City/State and Zip Code	
		SHOMARACCOUNTING.COM (to be used for future annual report notification)	
For further info	ormation concerning this matter, please	call:	
	MIRA ZAKI	at (_305') 825-1123	
	Name of Person	Area Code & Daytime Telephone Number	
Enclosed is a cl	heck for the following amount:		
\$25.00 Filir	ng Fee \$\bigs\\$30.00 Filing Fee &\bigs\\$Certificate of Status	(additional copy is enclosed) Certified C	of Status &
·	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

MOUS	SA INVESTMENT, LL	C	Zuin Con
(<u>Name of the Limited Lin</u> (A Flo	bility Company as it now appearida Limited Liability Company)	ars on our records.)	OCACA CALLAND
The Articles of Organization for this Limited Liabil	ity Company were filed on	10/19/2009	and assigned
Florida document numberL0900010066	<u>4</u> .		3 00 CA
			8.2
This amendment is submitted to amend the following	ng:		F 0
A. If amending name, enter the new name of the	limited liability company he	ere:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Comp	oany," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable	,,		
(Principal office address MUST BE A STREET A.			
Trincipul Office address MOST BETT STREET A.	<i></i>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		
B. If amending the registered agent and/or r registered agent and/or the new registered office	•	our records, enter	the name of the new
- CHILDREN WILLIAM CO. VIII NO. 11 SERVICE CO. 11 C			
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	E	nter Florida street add	lress
		, 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, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

<u> Fitle</u>	Name	<u>Address</u>	Type of Action
MGRM_	MIRA ZAKI	7777 NW 146TH ST MIAMI LAKES, FL 33016	Add Remove
`			Add Remove
			Add Remove
D. If amend	ling any other information, o	enter change(s) here: (Attach additional sheets, if necessary.)	_
			
 Dated	OCTOBER 21		_
	Signature	of a member or authorized representative of a member	
		MIRA ZAKI	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00