## 109000/06760

	(Requestor's Name)
	(Address)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Engaled Instructions	

Special Instructions to Filing Officer:

A. LUNT

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**EXAMINER** 

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SECRETARY OF STATE

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## **COVER LETTER**

	gistration S vision of Co	ection orporations		
SUBJECT:	F	FLORIDA INVESTI	MENT INTERNATIONAL LLC	
oobone			nited Liability Company	_
		f Amendment and fee(s) are so	•	
r tease return	i aii corresp	ondence concerning uns mate	er to die following.	
			DANNY HOCHMANN Name of Person	<del></del>
		FLORIDA IN	VESTMENT INTERNATIONAL LLC	. 2009 TAL
		2100 CC	Firm/Company  ONSTITUTION BLVD, STE 156	T 1. 2009 DEC 2 SECRETAT TALLAHAS
		2100 00	Address	- SEX -
		SAF	RASOTA, FLORIDA 34231	FEG T
		DHC	City/State and Zip Code  OCHMANN@GMAIL.COM	: 29 ATE DRIDA
For further in	nformation	concerning this matter, please	(to be used for future annual report notification) call:	
		NY HOCHMANN	at () 813 528 3735	
	Name	of Person	Area Code & Daytime Telephone Num	ber
Enclosed is a	check for t	the following amount:		
<b>▼ \$</b> 25.00 Fi	lling Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy Certification (additional copy is enclosed) Certification	Filing Fee, icate of Status & ied Copy ional copy is enclosed)
	Regist Divisi P.O. B	LING ADDRESS: ration Section on of Corporations lox 6327 assee, 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

FLORIDA IN	VESTMENT INTERNAT	IONAL LLC		
(Name of the Limited	Liability Company as it now appe Florida Limited Liability Company	ars on our records.)		
The Articles of Organization for this Limited L Florida document number		11. 04. 2009 and assigned		
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	f the limited liability company h	ere:		
	N/A			
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liability Com	pany," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applic	cable:	AHE B		
(Principal office address MUST BE A STREE	ET ADDRESS)	ASSE Y		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)  B. If amending the registered agent and registered agent and/or the new registered of	or registered office address on	our records, enter the name of the ne		
Name of New Registered Agent:	N/A			
New Registered Office Address:				
	I	Enter Florida street address		
		, Florida		
	City	Zip Code		
New Registered Agent's Signature, if changing	Registered Agent:			
I hereby accept the appointment as registere the provisions of all statutes relative to the p accept the obligations of my position as reg	proper and complete performand	re of my duties, and I am familiar with and		

If Changing Registered Agent, Signature of New Registered Agent

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>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DANNY HOCHMANN	2100 CONSTITUTION BLVD. SUITE 156 SARASOTA, FL 34231	✓ Add ☐ Remove
			Add Remove
			ZADEC 2
			RY UP SEEF. FLORID
			Add Remove
			Add Remove
D. If an	nending any other information, enter	change(s) here: (Attach additional sheets, if necessary	v.)
	RGÉGISTERED AGENT ADDE	RESS CORRECTION: "SUITE 154" CHANGE	TO
	"SUITE 156"		
	MGR AND MGRM ADDRESS (	CORRECTION : INSTEAD OF USING WORL	<u> </u>
	"PRAHA 5", USE "PRAGUE 5"		,st
	- INSTEAD OF USING MGRM	FILIP SEJVL , USE MGR FILIP SEJVL	
Dated _	DECEMBER 16,	2009	
		nember or authorized representative of a member  SEJVLOVA  Typed or printed name of signee	All the state of t

Page 2 of 2

Filing Fee: \$25.00