L090001077/2

(Requestor's Name)						
(Ad	dress)					
. (Ad	dress)					
(Cit	y/State/Zip/Phon	e #)				
PICK-UP	MAIT	MAIL				
(Bu:	siness Entity Nar	me)				
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



600180621376

05/11/10--01017--014 **25.00

FILED
10 MAY II PH 2: 45
SECRETARY OF STATE

J. BRYAN

MAY 12 2010

EXAMINER

COVER LETTER

TO:	Registration S Pivision of Co					
SUBJE	CCT:	VENUS INVES	VENUS INVESTMENT GROUP, LLC			
			ited Liability Company	_		
The en	closed Articles of	f Amendment and fee(s) are su	bmitted for filing.			
Please	return all corresp	ondence concerning this matter	r to the following:			
	ALEXANDRE A MOURA					
			Name of Person			
VE			JS INVESTMENT GROUP			
			Firm/Company	– ඉං ර		
	2550 COLLINS AVE APT 1012			TO 3 T		
	Address					
		B.A.I	AMIDEACH EI 22140	TILL PH 2: 45		
	MIAMI BEACH, FL 33140 City/State and Zip Code					
	355					
		E-mail address: (to be used for future annual report notification)			
For fur	ther information	concerning this matter, please	call:			
	ALEXA	NDRE A MOURA	at () 522188143639	1		
Name of Person		of Person	Area Code & Daytime Telephone Num	ber		
Enclose	ed is a check for t	the following amount:				
₹ 25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Certific (additional copy is enclosed) Certific	Filing Fee, cate of Status & ied Copy onal copy is enclosed)		
MAILING ADDRESS: Registration Section			STREET/COURIER ADDRESS: Registration Section			
Division of Corporations P.O. Box 6327			Division of Corporations Clifton Building			

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ير VENUS INVESTMENT GROUP, LLC							
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)							
(A Piolina i	rmnea r	ability Company)		ES 2.			
The Articles of Organization for this Limited Liability Company were filed on							
Florida document numberL09000107712	<u></u> .			57 4 0			
				10 A 3			
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the lim	ited liabi	lity company here:		500			
				7			
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limit	ed Liability Company	," the designation "L	I.C" or the abbreviation			
Enter new principal offices address, if applicable:		2550 COLLINS AVE APT 1012					
(Principal office address MUST BE A STREET ADDR	RESS)	MIAMI BEACH, FL 33140					
	_						
Enter new mailing address, if applicable:		2550 COLLINS	AVE APT 1012				
(Mailing address MAY BE A POST OFFICE BOX)		MIAMI BEACH, FL 33140					
Change marks 1964 195 4 1 (201 (2) 1 1 CE 1927)		W. W. W. B. W. W.					
B. If amending the registered agent and/or regist registered agent and/or the new registered office address Name of New Registered Agent: ALEX	ress here		-				
New Registered Office Address: 2550	COLLIN	S AVE APT 101	2				
	Enter Florida street address						
	MIAMI BEACH Florida 33140						
	MIA	City	, Fiorida	Zip Code			
		Cuy		zip code			
New Registered Agent's Signature, if changing Registered	d Agent:						
I hereby accept the appointment as registered agent of the provisions of all statutes relative to the proper an accept the obligations of my position as registered ag being filed to merely reflect a change in the registere company has been notified in writing of this change.	nd comple gent as pi ed office d	ete performance of s rovided for in Chap	my duties, and ha ner 608, F.S. Or, i onfirm that the lim	m familiar with and if this document is ited liability			
	Page 1	or2:/\\	· F				

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

Title <u>Name</u> **Address** Type of Action 1504 BAY ROAD APT 611 MIAMI BEACH, FL 33139 ☐ Add` ☑ Remove CARLOS A VELEZ MGR_ ☐ Add Remove ☐ Remove ∏Add ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ___ MAY 4 Signature of a member or authorized representative of a member ALEXANDRE À MOURA
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00