## 209000121331

(R	equestor's Name)
(A	ddress)
(A	ddress)
,	,
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
	Certificates of Status
Special Instructions to	A. LUNT
	JAN 19 2010
	EXAMINER

Office Use Only



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SECRETARY OF STATE
TALLAHASSEF ELTATE

## **COVER LETTER**

	iration secution of Corpor				
eunidet.		CGBR INV	ESTMENTS LLC		
Name of Limited Liability Company					
•					
The enclosed	Articles of Am	endment and fee(s) are sub	mitted for filing.		
Please return a	ll corresponde	ence concerning this matter	to the following:		
		JOHN O. SUTTON			
	Name of Person				
JOHN O. SUTTON, P.A.					
	Firm/Company				
		2655 LEJEUNE RD. PH II			
	Address				
		CORAL GABLES, FL 33134			
		City/State and Zip Code  JOHN@JAMERSONSUTTON.COM			
	-	E-mail address: (t	o be used for future annual report no	otification)	
For further inf	ormation cond	cerning this matter, please ca	ail:		
	JOHN O. S	SUTTON, ESQ.	at ( 305 )	448-1295	
Name of Person		Area Code & Day	time Telephone Number		
Enclosed is a	check for the t	following amount:			
\$25.00 File		\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Registrati Division of P.O. Box	G ADDRESS: on Section of Corporations 6327	STREET/COL Registration Ser Division of Cor Clifton Building 2661 Executive	porations 3	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	INVESTMENTS LLC	on our records
(A Florida	ty Company as it now appears a Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Florida document number	Company were filed onO	ecember 22, 2009 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	nited liability company here	;
The new name must be distinguishable and end with the will.L.C."	ords "Limited Liability Compar	
Enter new principal offices address, if applicable:		<b>2010</b> : SEC ALL
(Principal office address MUST BE A STREET ADD	ORESS)	AHE AN
		ARY SSE
Enter new mailing address, if applicable:		OF S
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or regi registered agent and/or the new registered office ad		ur records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Fut	er Florida street address
	Env	
	City	, Florida 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 = Managing Member Type of Action Tit<u>le</u> Name Address **MGR** CARMELO D'GRAZIA 2655 LeJeune Road, Penthouse II ☐ Add Coral Gables, Florida 33134\_ ✓ Remove **BENITO ROBLES** MGR 2655 LeJeune Road, Penthouse II ☐ Add Remove Coral Gables, Florida 33134\_ MGRM DILON ASSETS INC. 2655 LeJeune Road, Penthouse II ✓ Add Coral Gables, Florida 33134 Remove Remove ဌဌ  $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Amending Article IV of the Articles of Organization of CGBR Investments LLC to be a Member-Managed Company, with the Managing Member as Dilon Assets Inc., as indicated above. January 12 2010 Dated Signature of a member or authorized representative of a member JOHN O. SUTTON Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00