L09000122135

(Requestor's Name)					
(Address)					
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(Cit	ty/State/Zip/Phone	; #)			
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(Document Number)					
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MAR 2 9 2012

COVER LETTER

TO: Registration Section * Division of Corporations
SUBJECT: Solid Investments Cooup LLC. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Franya Ruiz Name of Person Solid Investments Group U.C. Firm/Company
14005 NW 15th Dure Address
Pembroke Phis Cl 33020 City/State and Zip Code France Phis Company Research Company Resea
For further information concerning this matter, please call:
JUlissa Hojica at (954) 668-5892 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount: \$\sum_\$25.00 Filing Fee \$\sum_\$55.00 \text{ Filing Fee \$
(additional copy is enclosed) Certified Copy (additional copy is enclosed)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

12 MAR 28 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

February 24, 2012

FRANYA RUIZ 14005 NW 15TH DR PEMBROKE PINES, FL 33028

SUBJECT: SOLID INVESTMENTS GROUP LLC

Ref. Number: L09000122135

We have received your document for SOLID INVESTMENTS GROUP LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 212A00007871

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

_ Olice annestr	rents Group	LLC	
(Name of the Limited) (A	Liability Company as it no Florida Limited Liability Co	w appears on our re ompany)	<u>cords.</u>)
The Articles of Organization for this Limited Lia Florida document number		d on 10/18	and assigned SECRE SECRE
This amendment is submitted to amend the follo	wing:		20 PF C
A. If amending name, enter the new name of	the limited liability com	pany here:	ED STA ORPORA
N/A			√n =≅
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liabili	ty Company," the des	ignation "LLC" or the abbieviation
Enter new principal offices address, if applica	ble: N	A	
(Principal office address MUST BE A STREET		·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	•		
B. If amending the registered agent and/oregistered agent and/or the new registered off		ess on our record	s, enter the name of the new
Name of New Registered Agent:	N/A		
New Registered Office Address:	NIA	E El J.	street address
		Enter r iorida	sireei adaress
•		, F	lorida
	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, 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>	Name U.C. M	Address UC VU	Type of Action			
OFFICE	Luis H. Rios	Address MGRM Avenida da Suica #13 Estoril 2765 Portugal	X Add Remove			
	·		Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
D. If amendi ——	ing any other information, enter chan	ge(s) here: (Attach additional sheets, if necessar	SECI DIVISIO			
			FILED SIAN OF CORPORATION OF CORPORA			
Dated		—/ —/	CRATIONS			
	Franya Rui	er or authorized representative of a member Z d or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00