1100000 10532

•		•
(Requestor's Name)	
. (Address)	
(Address)	
(City/State/Zip/Phone #	<i>f</i>)
PICK-UP	☐ WAIT	MAIL
·	o	
· · · · · · · · · · · · · · · · · · ·	Business Entity Name	9)
(Document Number)	
Certified Copies	Certificates o	of Status
Special Instructions	to Filing Officer:	
	•	

Office Use Only



600182609546

07/01/10--01027--031 **175.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JUL 2 0 2010

EXAMINER

COVER LETTER

Division of Corp	porations
SUBJECT: OPUS	ONE IMESTMENTS LLC
·	Name of Limited Liability Company
•	
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.
Please return all correspondence	ndence concerning this matter to the following:
	MARTIN WERNER
	Name of Person
	ATTORNEY AT LAW
:	Firm/Company
	102 NE 2 NA ST #166
•	Address
	BOCO RATON FZ 33 Y32
••	MILES S & S & E HOTMAIL. COM
	E-mail address: (to be used for future annual report notification)
For further information co	oncerning this matter, please call:
•	
MARTIN	WERNER at (305) 764 9283
Name of	Person Area Code & Daytime Telephone Number
•	
Enclosed is a check for th	e following amount:
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Registration Section

TO:

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

09 JUL 28 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

July 8, 2010

OPUS ONE INVESTMENTS, LLC 16275 VINTAGE OAKS LN DELRAY BEACH, FL 33484

SUBJECT: OPUS ONE INVESTMENTS, LLC

Ref. Number: L10000010532

We have received your document for OPUS ONE INVESTMENTS, LLC and your check(s) totaling \$175.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Amendments to articles of organization of a Florida limited liability company must comply with section 608.411, Florida Statutes. For your convenience, we are enclosing the appropriate form and instructions.

Please return 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) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 810A00016592

MARTIN M. WERNER

Attorney At Law

102 NE 2ND Street Unit #166 Boca Raton, Florida 33432

Phone: 305-764-9283 Fax: 954-697-8570 Email: miles5856@hotmail.com

July 20, 2010

Florida Dept State Div corporations P.O. Box 6327 Tallahassee, Florida 32314 Tammy Hampton 850-245-6855

Ref numbers: L100000 10532 Ref numbers: P090000 96605

Please find enclosed revised documents for Opus One Investments LLC and M&M Financial Consulting Inc.

Please contact me should you have any questions.

Sincerely,

Martin Werner

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION The Articles of Organization for this Limited Liability Company were filed on Florida document number x L 100 000 10532 This amendment is submitted to amend the following:

A.	If amending	name,	enter	the new	name	of the	limited	liability	com	pany	/ here	

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 390 SE MIZNER BLND. Enter new principal offices address, if applicable: '(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

	Citv	, riorius Zip Code
		. Florida
	Enter Fl	orida street address
New Registered Office Address:	•	
Name of New Registered Agent:		

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 Title . **Address Type of Action** <u>Name</u> MARTH WERNER 102 NE 2ND ST #166 WERN JOHN MARK MARWO 1675 VINTAGE DAKS LANE Add MGR ☐ Remove Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member of authorized representative of a member MARK MARWO Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00