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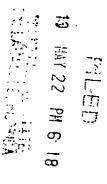
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COVER LETTER

OBG INV	ESTMENTS, L.L.C.		
SUBJECT.	Name of Limit	ed Liability Company	
The enclosed Articles of	Lisa Lanza, Esq. Name of Person MELISSA P. LANZA, P.A. Firm/Company 104 Crandon Blvd., Suite 420 Address Key Biscayne, FL 33149 City/State and Zip Code Lisa@MelissaLanzalaw.com E-mail address: (to be used for future annual report notification) er information concerning this matter, please call:		
Please return all correspondent	ondence concerning this matter to	o the following:	
	Lisa Lanza, Esq.		
		Name of Person	
	MELISSA P. LANZA, P.A.		
		Firm/Company	
	104 Crandon Blvd., Suite 42	20	
		Address	
	Key Biscayne, FL 33149		
	•		
	E-mail address: (to	be used for future annual report notific	cation)
For further information of	concerning this matter, please cal	1:	
Lisa Lanza, Esq.		305 361-0997 at ()	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OBG INVESTMEMNTS, L.L.C.	
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited Liability Company were filed on \(\frac{1}{2} \)	March 4, 2010 and assigned
Florida document number L10000024492	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company l	here:
The new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	: : 5
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>
	2 1
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	4 0
	ى ﴿ ﴿
3. If amending the registered agent and/or registered office address or egistered agent and/or the new registered office address here:	n our records, enter the name of the n
Name of New Registered Agent:	
New Registered Office Address:	
Enter Flo	orida street address
	, Florida
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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Ulises Reyes	2920 Center Street, Miami, FL 33133	
		33133	B Add
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If an effective date i Note: If the date	if other than the date of is listed, the date must be specific inserted in this block does not be determined.	cific and cannot be s not meet the	applicable statutor	ng or more than 90 d ry filing requireme	_ (optional) lays after filing.) Pursuant ents, this date will not b	to 605.020 be listed a
document's effec	_	tive date, b	ut not an effec	tive time, at 1	2:01 a.m. on the	earlier o
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Page 3 of 3

Filing Fee: \$25.00