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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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K. SALY EXAMINER

APR 29

## **COVER** LETTER

	ration Sec on of Corp		`	
SUBJECT:	ARINO IN	VESTMENTS, LLC		
30 <b>03</b> EC1		Name of Lim	ited Liability Company	
The enclosed A	rticles of A	mendment and fee(s) are sub	mitted for filing.	
Please return al	correspon	dence concerning this matter	to the following:	
		TAMARA L. SURRATT		
			Name of Person	
		LEGACY FAMILY OFFI	CE, LLC	
			Firm/Company	
		23160 FASHION DRIVE	SUITE 227	
			Address	
		ESTERO, FL 33928		
			City/State and Zip Code	
		TSURRATT@LEGACYFA		
		E-mail address: (	to be used for future annual report notifi	cation)
For further info	rmation co	ncerning this matter, please ca	all:	
TAMARA L. S	URRATT		- 239 949-1982 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a ch	eck for the	following amount:		
\$25.00 Filin	ng 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:

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

SECRETARY OF STATE

TARINO INVESTMENTS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	, and the same of	· LURIÑO	
The Articles of Organization for this Limited I lorida document number L10000031956		and assigned	
iorida document number	· · · · · · · · · · · · · · · · · · ·		
his amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability company here:		
he new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."	
Cnter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)	<del></del>	
	<u></u>		
Enter new mailing address, if applicable:			
<u>Mailing address MAY BE A POST OFFICE</u>	<u> </u>		
	·		
) If amouding the projectional agent are	l/on nocietanad office adduces on our records	autou the name of the	
egistered agent and/or the new registered of	l/or registered office address on our records, office address here:	enter the name of the	
Name of New Registered Agent:	TAMARA L. SURRATT	150	
Navy Degistered Office Address			
New Registered Office Address:	Enter Florida 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 Title Name Address **Type of Action** TAMARA L. SURRATT MGR 23160 Fashion Drive Add Suite 227 Estero, Fi 33928 Change STEVEN L. MARINO MGR Fort Myers, FL 33966 Remove ☐ Change ☐ Add ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change

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(If an eff Note:	ive date, if other than the date of filing:    Did 20/0 (optional)
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	Janara L. Surratt
	TAMARA L. SURRATT  Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00