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SECRETARY OF STATE

T. CLINE

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EXAMINER

COVER LETTER

Registration Section

TO:

Division of Cor	porations		
SUBJECT:	TangoPoint	Investments, LLC	
		ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sui	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Mitch Silverman	
		Name of Person	``
	Tang	oPoint Investments, LLC	
		Firm/Company	
	1	5755 Edgefield Road	2011 TAI
	· · · · · · · · · · · · · · · · · · ·	Address	CRE
	,	Wellington, FL 33414	2010 APR 29 PH 12: 11 SECRETARY OF STATTALLAHASSEE, FLORI
		City/State and Zip Code	SEE P
	si	vermitch@yahoo.com	F STAI
For further information a	E-mail address: (concerning this matter, please	to be used for future annual report notification)	0. 10 m
FOI Turdier information (concerning this matter, picase (,aii.	***
	ch Silverman	at (561) 214.44	
Name o	f Person	Area Code & Daytime Telephor	ne Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Scriffed Copy (additional copy is enclosed)	60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tango	<u>Point Investments, LI</u>	LC	
(<u>Name of the Limited Limb</u> (A Flori	ility Company as it now appeda Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liability Florida document number		April 12, 2010	and assigned
This amendment is submitted to amend the following	;		
A. If amending name, enter the new name of the l	imited liability company he	ere:	7010 SE
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Comp	pany," the designation "	LDC or the abbreviation
Enter new principal offices address, if applicable:		-	SEZ IT
(Principal office address MUST BE A STREET AD	DRESS)		77 7
	 		0 1 1 9 1 1 9 1 1 1 1 1 1 1 1 1 1 1 1 1
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or represent and/or the new registered office a		our records, enter	the name of the new
Name of New Registered Agent:			
New Registered Office Address:	E	nter Florida street add	tress
		. 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 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>	<u>Name</u>	<u>Address</u>	Type of Action
mgrm	Jerome Abraczinskas	112 Maple Ridge Road	✓ Add
		Millville, PA 17846	Remove
			
	·		Add Remove
			
			Add Remove
			2010 SE
<u></u>			Add A
			ARY O
			-FTAdd → r
			Remove RANGE OFF 9
			Add
			Remove
D. If amend	ling any other information, ent	ter change(s) here: (Attach additional sheets, if necessary.)	1
			
			···
			
			
Dated	April 26	, 2010	
	Signature of	a member or authorized representative of a member	
	orginature or	Mitch Silverman	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00