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EXAMINER						

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO:	Registration Secti Division of Corpo						
SUBJ	FCT:	NY INVESTI	MENT GROUP, LLC				
ЭОВО .		Name of Limi					
The er	nclosed Articles of Ar	nendment and fee(s) are sub	omitted for filing.				
Please	return all correspond	ence concerning this matter	to the following:				
			CARLOS CHAVEZ	<u> </u>			
			Name of Person				
		NY IN	VESTMENT GROUP, LL	<u>C</u>			
			Firm/Company				
		4851 NW 103rd AVE SUITE 43-E					
		Address					
		SUNRISE, FL 33351 City/State and Zip Code					
		DM					
	tification)						
For fur	rther information cond	cerning this matter, please c	all:				
		S CHAVEZ	at (<u>754</u>)	3683799			
Name of Person		at (<u>754</u>) Area Code & Dayt	ime Telephone Number				
Enclos	ed is a check for the t	following amount:					
[] \$25	5.00 Filing Fee [\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclos	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Registration Division of P.O. Box	f Corporations	STREET/COUI Registration Sect Division of Corp Clifton Building 2661 Executive (orations			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NY <u>I</u> N	IVESTMEN	T GROUP, LL	C			
(Name of the Limited I (A l	Liability Compar Florida Limited L	ny as it now appears iability Company)	on our records.)			
(, <u>-</u> ,				
The Articles of Organization for this Limited Lia	were filed on	4/20/2010	and assig	gned		
Florida document numberL100000422	253					
This amendment is submitted to amend the follow	wing:					
A. If amending name, enter the new name of	the limited liabi	lity company here:				
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ted Liability Company	," the designation	'LLC" or the ab	breviation	
Enter new principal offices address, if applical	4851 NW 103rd AVE SUITE 43-E					
(Principal office address MUST BE A STREET ADDRESS)		SUNRISE, FL 33351				
Enter new mailing address, if applicable:	4851 NW 103rd AVE SUITE 43-E					
(Mailing address MAY BE A POST OFFICE B	SUNRISE, FL 33351					
B. If amending the registered agent and/or registered agent and/or the new registered offi			r records, enter	the name of	the new	
registered agent and/or the new registered only	ce aduress here	4				
Name of New Desirement Assets	HAVEZ		AEC AEC			
Name of New Registered Agent:	·		全 游 😉	77		
New Registered Office Address:	4851 NW 10	3rd AVE SUITE		<u> </u>	#:Western	
Enter Florida street address						
	UNRISE	, Florida	33351	9 4 8		
		City		≘ z ip 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. Thereby confirm that the limited liability company has been notified in writing of this change.

I Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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> Address Type of Action <u>Name</u> **MGRM** CARLOS CHAVEZ 4851 NW 103rd AVE SUITE 43-E ☐ Add Remove SUNRISE, FL 33351 MGRM FERNANDO RODRIGUEZ ☐ Add 4851 NW 103rd AVE SUITE 43-E Remove SUNRISE FL 33351 Add Remove ∏ Add Remove □Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) CORRECTING ADDRESS IN ALL FIELDS TO REFLECT AS FOLLOWS 4851 NW 103rd AVE SUITE 43-E SUNRISE, FL 33351 APRIL 21 2010 Dated Signature of a member or authorized representative of a member CARLOS CHAVEZ Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00