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NOV-7 PM 2: 42

J. BRYAN

NOV - 8, 2011

EXAMINER

COVER LETTER

TO:

TO:	Registration S Division of Co			
SUBJE	СТ:		TMENT GROUP, LLC	
		(Name of Lim	lited Liability Company)	
The end	closed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please 1	return all corresp	ondence concerning this matter	to the following:	超喜州
			MARCO REIS	ON J PH 2: 5
			(Name of Person)	SER 3 C
Ÿ			JSA TAX CORPORATION (Firm/Company)	FLORE STATE
	•			gran and a second
			591. E SAMPLE RD (Address)	
		., РО	MPANO BEACH ,FL 33064	
			(City/State and Zip Code)	
For furt	her information	concerning this matter, please o	all:	
MARC	O REIS		at (9 5 4) 7 8 8 1 8 1	
	(Name	of Person)	(Area Code & Daytime Te	elephone Number)
Enclose	d is a check for	the following amount:		
X \$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ING ADDRESS:	STREET/COURIER Parietration Section	ADDRESS:
	Divisi	ration Section on of Corporations	Registration Section Division of Corporation	ns
		Box 6327 assee, FL 32314	Clifton Building 2661 Executive Center	Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	AM INVESTMENT GROUP, LLC	
(Name of the Limited (A	Liability Company as it now appears on ou Florida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Li		and assigned
This amendment is submitted to amend the follo	wing:	P 2: 5
A. If amending name, enter the new name of	the limited liability company here:	<u> </u>
The new name must be distinguishable and end with "L.L.C." B. If amending the registered agent and/o	or registered office address on our rec	
registered agent and/or the new registered of	nce address nere:	
Name of New Registered Agent:		
New Registered Office Address:	/Futou El	orida street address)
	(Emer Fic	niuu sireei uuuress)
		_, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type	e of Action
MGRM	ROBERTO RODRIGUES CO	OSTA RUA DR DOMINGOS ALDEMAR BOLDRINE 588 JARDMIM NOVA CAMPINAS FL 70000 BR	X X	Add Remove
			 	Add Remove
				Add Remove
				Add Remove
				Add Remove
	-		 	Add Remove
		ter change(s) here: (Attach additional sheets, if necessary.)	11 NOV -7 PH 2: 48	FILED
Dated _	NOVEMBER 01 Signature of	a member or authorized representative of a member		
	_	OBERTO M RODRIGUES COSTA		
		Typed or printed name of signee		1

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Filing Fee: \$25.00