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G. MCLEOD

OCT 28 2010

EXAMINER



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10/27/10--01031--009 **25.00

10 OCT 27 PM I2: 22
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Solus Investigations LLC Daniel Burke 3847 Rodeo Drive Sebring, Florida 33875

Home: 863-382-0503 / Cell: 863-446-0509 E-mail: modaburke@yahoo.com

October 21, 2010

Registration Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Reference: Solus Investigations LLC / Address Change

To Whom It May Concern:

This letter and the attached Articles of Amendment are to register a change of address for Solus Investigations LLC. The new address is 3847 Rodeo Drive, Sebring, Florida 33875. Also enclosed is a check in the amount of \$25.00 to register this address change. There are no other changes to register in reference to this business.

Qaniel Burke

COVER LETTER

TO:	stration Section sion of Corporations						
SUBJE	CT: Solus Investigations LLC Name of Limited Liability Company						
The end	The enclosed Articles of Amendment and fee(s) are submitted for filing.						
Please 1	eturn all correspondence concerning this matter to the following:						
	MOTTIS Daniel Burke						
	Morris Daniel Burke Name of Person Solus Investigations LLC Firm/Company						
	3847 Rodeo Drive						
	Sehring, FL 338)5 Gity/State and Zip Code Modabunke Q Yahoo. Com E-mail address: (to be used for future annual report notification)						
	E-mail address: (to be used for future annual report notification)						
For furt	er information concerning this matter, please call:						
	Name of Person at (£63) 446-0509 Area Code & Daytime Telephone Number						
Enclose	is a check for the following amount:						
□ \$25.	O Filing Fee \$\ Certificate of Status \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	osed)					
	MAILING ADDRESS: Registration Section Division of Corporations STREET/COURIER ADDRESS: Registration Section Division of Corporations						

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

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

9.20/0 and assigned Florida document number $\angle 10000063/32$

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the word "L.L.C."	ls "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRI	3847 Rodeo Drive Sebring, FL 33875
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3847 Rodeo Drive Sebring, FL 33875
B. If amending the registered agent and/or registered agent and/or the new registered office address	ered office address on our records, <u>enter the name of the new</u> ess here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
_\$e	Florida 33875

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>	Address	Type of Action	
		<u> </u>	Add	
			Remove	
	 		Add	
			Remove	
			Add	
			Add Remove	
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D. If ame	nding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)		
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Dated	actober si , soi	·O	_	
	maria Da	med Suche		
		or authorized representative of a member		
	Typed	or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00