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SECRETARY OF STAFE
ALT ABASSEE FEORINA

## **COVER LETTER**

то:	Registration Section Division of Corporations					
SUBJE	ECT: DUBAI INVESTMENTS, LLO					
001001	Name of Limited Liability Company					
The en	nclosed Articles of Amendment and fee(s) are submitted for filing.					
Please	return all correspondence concerning this matter to the following:					
	TAMMY PEREZ					
	Name of Person					
	TABADESA ASSOCIA	res				
	Firm/Company					
	7005 W 17TH CT					
	Address					
	HIALEAH, FL 33014	1				
·						
	TAMMYP@TABADESA.	COM				
	E-mail address: (to be used for future annual r	eport notification)				
For fur	orther information concerning this matter, please call:					
	TAMMY PEREZ at (_305 )	989-8776				
	Name of Person Area Code	& Daytime Telephone Number				
Enclos	sed is a check for the following amount:					
<b>▼</b> \$25	5.00 Filing Fee \$\bigcup\$\$30.00 Filing Fee \$\bigcup\$\$ Certificate of Status Certified Copy (additional copy is	Certificate of Status &				

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**

FILED

12 OCT -2 MI II: 14

DL	JBAI INVESTMENTS, LLC	SE(	CRETARY OF STATE
( <u>Name of the Limite</u> )	d Liability Company as it now appear A Florida Limited Liability Company)	s on our records AL	LEMASSEE, LEMKINE
The Articles of Organization for this Limited I. Florida document number	• •	07/28/2010	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, <u>enter the new name c</u>	of the limited liability company here	<u>2</u> :	
The new name must be distinguishable and end w T.A.C."  Enter new principal offices address, if applia office address MUST BE A STREE  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	cable:  ET ADDRESS)	ny," the designation "l	
B. If amending the registered agent and registered agent and/or the new registered o	office address here:	ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:	MINERVA ROJAS	<u> </u>	
New Registered Office Address:	8332 NW 155TH CT	ou Florida atront ad	duana
	Enter Florida street address		
	MIAMI City	, Florida	33178 Zip Code
Naw Desistand Assetts Signature if shanging	·		p

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 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 = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	MINERVA KHAWAIN	8332 NW 115TH CT MIAMI, FL 33178	Add Z Remove 
MGRM_	MINERVA ROJAS	8332 NW 115TH CT MIAMI, FL 33178	✓ Add Remove
MGR_	MARIAN KHAWAIN	8332 NW 115TH CT MIAMI, FL 33178	Add Remove
MGR	JORGE FUNG KHAWAIN	8332 NW 115TH CT MIAMI, FL 33178	<b>[</b> ∕] Add Remove
<u> </u>			Add Remove
·	· ·		Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	_
Jack Control of the C			<b>-</b>
Dated	SEPTEMBER 24 , 20	012	
	Signature of a membe	Viniva Rejes er or authorized representative of a member	
		INERVA ROJAS	
	Tynec	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00