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EXAMPLE

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: GOODY 2 INVEST MENTS LLC  Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
YANIR HADAN	
Name of Person	
GOODY 2 INVESTMENTS ILC Firm/Company	
3625 WBROWARD BY SMITE 203	
GORT LAUNGEDALE FL 33312  City/State and Zip Code  YANI RHADAN C GHALL COM  F-mail address: (10 be used for future annual report notification)	
YANI RHADAN CGHALL COM	
For further information concerning this matter, please call:	
YAMIR HADAN (321), 431 6745 55	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\text{\$\subset\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \$\text{\$\t	

#### 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

GOODY 2 INVEST	MENTS.		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	<del></del>	
The Articles of Organization for this Limited Liability Company Florida document number 1000881435	were filed on 813110	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
		1 2	
The new name must be distinguishable and end with the words "Lim" "L.L.C."	ited Liability Company," the designation '	HE abbreviation	
Enter new principal offices address, if applicable:		P 2	
(Principal office address MUST BE A STREET ADDRESS)			
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		<b>器型</b> 55	
Enter new mailing address, if applicable:		D	
(Mailing address MAY BE A POST OFFICE BOX)	<b>v</b>	<del>.                                    </del>	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being addéd or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
M <u>GRM</u>	MARAT GUZEVICH	3625 WBlowALDBL	Add  33/2 Remove
			Add Remove
	g. 200 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 -		Add  Remove  SEE SEE
			HASSIA Add
D. If ame	nding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessar	P.)
- - -			
_ _ Dated	09/13/10		······································
•	Signature of a member	r or authorized representative of a member	·····
	Typed	or printed name of signee Page 2 of 2	<del></del>
	V	<del>-</del>	

Filing Fee: \$25.00