10000097523

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B. BOSTICK
DEC - 4 2012

EXAMINER

COVER LETTER

TO: Registration Section - Division of Corporations

U.S. EB-5 INVESTMENTS 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:

Lily Zhong

Name of Person

Karen P. Mentor, P.A.

Firm/Company

7000 SE Federal Highway, Suite 200

Address

Stuart, FL 34997

City/State and Zip Code

mentorlawfirm@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lily Zhong

__,317、435-0188

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

Name of Person

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

Certificate of Status & Certified Copy (additional copy is enclosed)

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

U.S. EB-5 INVESTMENTS LLC

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

(A Florida Limited Liability Company)

(11 Tottaa Emittea E	nationary Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L10000097523</u> .	were filed on 09/17/2010 and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1620 West Oakland Park Blvd
(Principal office address MUST BE A STREET ADDRESS)	Suite 400
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale, FL 33311 APR DEC -3 PM
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, enter the name of the nev
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Designated Agentle Cignotium if shanging Designated Agents	

New Registered Agent's Signature, if changing Registered Agents

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>Name</u> <u>Title</u> <u>Address</u> **Type of Action** Add Remove Remove Add Remove Remove Add Remove

amei	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
_	
_	
· —	
	28/NOV/2012
	Signature of a member or authorized representative of a member
	Lily Zhong
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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