L10000113406

(Re	questor's Name)	
· (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
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Office Use Only



900270681979

Amend

03/18/15--01012--008 **25.00



APR 15 2015 N. CAUSSEAUX

COVER LETTER

TO: Registration Secti Division of Corpo			
SUBJECT: Gol	den Tree Inv	estment, LLC	,
SUBJECT.		ited Liability Company	
The enclosed Articles of An	nendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	Jean Jo	oseph	
		Name of Person	
		Firm/Company	
	1515 North F	ederal Highwa	ay Suite 300
		Address	
	Boca Raton,	, Florida 3343	2
		City/State and Zip Code	
	jean@evergreer	nui.com to be used for future annual repo	
Par forther information con-	·	·	nt notification)
For further information cond			2.0400
Jean Joseph		$\frac{1}{1}$ at $\frac{754}{1}$ $\frac{422}{1}$	2-2130 Daytime Telephone Number
Name of Pe	rson	Area Code L	Jaytime Telephone Number
Enclosed is a check for the f	following amount:		
■ \$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

(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	
(A Florida Limited Liability Company)	-
The Articles of Organization for this Limited Liability Company were filed on $\frac{1}{2}$	1/01/2010 and assigned
Florida document number L10000113606	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liability company h</u>	<u>ere</u> :
The new name must be distinguishable and end with the words "Limited Liability Company," the	
Enter new principal offices address, if applicable:	7 5 TA
(Principal office address MUST BE A STREET ADDRESS)	最高工
Trincipal office dadress most be A STREET ADDRESS	6 F
	2 T
	四级 2
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address o registered agent and/or the new registered office address here: Name of New Registered Agent:	n our records, <u>enter the name of the n</u>
New Registered Office Address:	orida street address
Liner 1 se	r ista dir cca sistar cus
City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	

If Changing Registered Agent, Signature of New Registered Agent

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 Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager '

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
CFO	Winston, Charel	1515 North Federal Highway Suite 3	300 □ Add
		Boca Raton, Florida 334	32 Remove
			Add
			Remove
		•	SECRETARION PROPERTY OF THE PR
			PREMOVEN
			DRIBE - Add
			☐ Remove
			□ Remove
			<u> </u>
· · · · · · · · · · · · · · · · · · ·			Add
			□ Remove

The effective date must be specifi	on the date of filing:(options ic, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the Florida Department of State)
(The effective date must be specifi	ic, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
the date this document is filed by	ic, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the Florida Department of State)
(The effective date must be specificated the date this document is filed by	ic, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the Florida Department of State)

Page 3 of 3

Filing Fee: \$25.00

