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## **COVER LETTER**

SUBJECT: AGS Investmen	t Aloup, LLC	<u> </u>
Name of Li	imited Liability Company	
The enclosed Articles of Amendment and fee(s) are su	ubmitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Alan Silv	Name of Person	
(additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  MAILING ADDRESS:  STREET/COURIER ADDRESS:		
The enclosed Articles of Amendment and fec(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Alan Silvel  Name of Person  Alas Investment Group, LLC  Firm/Company  Lors Nw 41 Prive, WA  Address  Lora (Springs) FL 33067  City/State and Zip Code  ASilvel My HcC, wet  E-mail address: (to by used for future annual report notification)  For further information concerning this matter, please call:  Alan Silvel  Name of Person  at (934)  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  Exceptificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  MAILING ADDRESS:  STREET/COURIER ADDRESS:	<del></del>	
Coral Spri Asilver	ings; FL 33067 City/State and Zip Code 2 My Acc. net	iontion
E-mail audiess	s. (to be used for intere minimi report notice	canon,
Alangilver		779 Telephone Number
<b>№</b> \$25.00 Filing Fee	Certified Copy	Certificate of Status & Certified Copy
MAILING ADDRESS:		ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations

TO:

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 )	p, LLC	
/ A. Mondo I. imited 1 (20) [1]	V L AMRAMA I V	
	a 11/25/2010 and assis	mad
The Articles of Organization for this Limited Liability Company were	filed on 1/0/ and assig	,neu
The Articles of Organization for this Limited Liability Company were Florida document number \(\(\textit{L1994115643}\).	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability of	ompany here:	
The new name must be distinguishable and contain the words "Vimited Liability Co	,LLC	<u> </u>
The new name must be distinguishable and contain the words "Vimited Liability Co	impany," the designation "LLC" or the appreviation call.	·
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·	<u></u>
	CC 7504	
	₩	زب
Enter new mailing address, if applicable:	756 316	
(Mailing address MAY BE A POST OFFICE BOX)		
(Mutting duaress MAT BE AT OST OTTTCE BON)		
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B. If amending the registered agent and/or registered office	address on our records, enter the name o	f the n
registered agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Flags Jac.	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 provisions of all statutes relative to the proper and complete performance accept the obligations of my position as registered agent as provi- being filed to merely reflect a change in the registered office addi-	ormance of my auties, and I am familial with ided for in Chapter 605, F.S. Or, if this docum	nent is
1 1		

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being adde or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date o lote: If the date inserted in this block does not meet the applicable stat ocument's effective date on the Department of State's records.	f filing or more than 90 days after filing.) Pursuant to tutory filing requirements, this date will not be	o 605.0200 c listed as
e record specifies a delayed effective date, but not an ef The 90th day after the record is filed.	ffective time, at 12:01 a.m. on the e	arlier o
rated 9/8/19		
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Page 3 of 3

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Typed or printed name of signee