

**L 10000/31243**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : RE-MMAP INC  
Account Number : I20110000080  
Phone : (561) 623-0241  
Fax Number : (561) 953-0089

2013 APR 24 PM 1:57  
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TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: Info@re-mmmap.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
AZURE INVESTMENTS LLC

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A. LUNT

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**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: **AZURE 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:

**HUBERT MCINTOSH**

Name of Person

**RE-MMAP INC**

Firm/Company

**4500 BELVEDERE ROAD, SUITE A-3**

Address

**WEST PALM BEACH, FL 33415**

City/State and Zip Code

**INFO@RE-MMAP.COM**

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

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

**HUBERT MCINTOSH**

Name of Person

at ( **561** ) **623-0241**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

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

☐ \$60.00 Filing Fee,  
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**

**AZURE INVESTMENTS LLC**

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

The Articles of Organization for this Limited Liability Company were filed on 12/27/2010 and assigned Florida document number L10000131243.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4500 BELVEDERE ROAD, SUITE A-3  
WEST PALM BEACH, FL 33415

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4500 BELVEDERE ROAD, SUITE A-3  
WEST PALM BEACH, FL 33415

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

RE-MMAP INC

New Registered Office Address:

4500 BELVEDERE ROAD, SUITE A-3

*Enter Florida street address*

WEST PALM BEACH, Florida 33415

*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.*

*Robert McInnis*

If Changing Registered Agent, Signature of New Registered Agent

**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 = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	GREENSLADE, ALEX	RE-MMAP INC	<input type="checkbox"/> Add
		4500 BELVEDERE ROAD, SUITE A-3	<input type="checkbox"/> Remove
		WEST PALM BEACH, FL 33415	
MGR	GREENSLADE, ALEX	4500 BELVEDERE ROAD, SUITE A-3	<input type="checkbox"/> Add
		WEST PALM BEACH, FL 33415	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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Dated APRIL 24TH, 2013.

*Sylvia Rosales*

Signature of a member or authorized representative of a member

**SYLVIA ROSALES**

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**

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