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J. SAULSBERRY EXAMINER

FEB 14 2011

COVER LETTER

Registration Section

TO:

Division of Co	orporations		
SUBJECT:	FF3 Inv	vestments LLC	
	Name of Lim	ited Liability Company	·
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	pondence concerning this matte	r to the following:	
		David te Boekhorst	
		Name of Person	
	Corpag	Registered Agents (USA) Inc	· · · · · · · · · · · · · · · · · · ·
•		Firm/Company	ZOII
	999 (Brickell Avenue, Suite 820	2011 FEB 11 SECRETARY
		Address	ARY SSE
		Miami/FL 33131	PH 1: 13
		City/State and Zip Code	
		david@corpag.com (to be used for future annual report notification	327 h
For further information	concerning this matter, please	•	on)
David te Boekhorst Name of Person		at (305) 358 7872 Area Code & Daytime Telephone Number	
Name	of reison	Area Code & Dayume Tel	reprode 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 Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Investments LLC		
(<u>Name of the Limited Liabi</u> (A Floric	lity Company as it now appears la Limited Liability Company)	on our records.	
The Articles of Organization for this Limited Liability	Company were filed on	1/18/2011	and assigned
Florida document number L1100006639	·		
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the li	imited liability company here	:	2011 SE
The new name must be distinguishable and end with the vull.L.C."	words "Limited Liability Compan	y," the designation	TELEC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		P P
			95
			및 [®] ω
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		ır records, <u>ente</u>	r the name of the nev
Name of New Registered Agent:	- · · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:	Ente	er Florida street d	nddress
		. Florida	
_	City	, FIGUA	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 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

Type of Action Address Title Name Arthur F. Falk MGR 999 Brickell Avenue, Suite 820 **✓** Add Remove Miami/FL_33131 United States of America ☐ Add ☐ Remove ☐ Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) February 10 2011 Dated ___ Signature of a member or authorized representative of a member David te Boekhorst Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00