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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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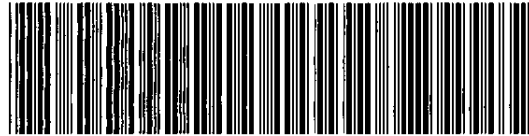
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK
APR 12 2011
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BRT Roth 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:

Doreen Bennett

Name of Person

Goodman Breen & Gibbs

Firm/Company

3838 Tamiami Trail North, Suite 300

Address

Naples, FL 34103

City/State and Zip Code

firm@goodmanbreen.com

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Doreen Bennett

Name of Person

at (239)

403-3000

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)

☒ ~~\$55.00~~ 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

BRT Roth Investments, LLC

Page 1 of 2

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	Cagey Management Service	3838 Tamiami Trail North, Suite 300 Naples, FL 34103	☐ Add ☒ Remove
MGR	Climb Management, LLC	3838 Tamiami Trail North, Suite 300 Naples, FL 34103	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated April 8, 2011.

Signature of a member or authorized representative of a member

Kenneth D. Goodman

Typed or printed name of signee

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STATE OF FLORIDA
TALLAHASSEE