# L110000 78542

(Re	questor's Name	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phor	ne #)
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(Bu	siness Entity Na	ime)
(Do	cument Number	)
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### **COVER LETTER**

TO:	Registration Sect Division of Corpo			
SUBJE	Fonfo	Fun Boats LL	_C	
SUBJE	.CI:		ited Liability Company	
The en	closed Articles of A	mendment and fee(s) are subr	mitted for filing.	
Please	return all correspond	dence concerning this matter t	to the following:	
		Alfonso Lope	ez	
		· · · · ·	Name of Person	
			Firm/Company	
		1865 Brickel	I Ave #1513	
			Address	
		Miami, FL 33	3129	
			City/State and Zip Code	
		lopez@305broadc		4
		•	to be used for future annual report notification	ation)
For fur	ther information con	cerning this matter, please ca	all:	
Alfo	onso Lope	ez	<sub>at</sub> (305) 301271	12
	Name of P	'erson	Area Code Daytime T	Felephone Number
Enclose	ed is a check for the	following amount:		
■ \$25	5.00 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

## Fonfo Fun Boats 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 3/31/2011 and assigned Florida document number L11000038542 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: **AOL INVESTMENTS LLC** 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: N/A (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address Florida City

#### 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 605, 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 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 = MARIE AND AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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amending any other information, enter change(s) here: (Attach addition	at sheets, if heecsbury.
	a the second sec
Effective date, if other than the date of filing:  The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be the date this document is filed by the Florida Department of State)	(optional) more than 90 days after
Dated Feb 4th , 2014	
A	
Signature of a member or authorized representative of	f a member
Alfonso Lupezi	
Typed or printed name of signee	

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Filing Fee: \$25.00