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J. SAULSBERRY EXAMINER APR 14 2011

COVER LETTER

Division of Corporations
SUBJECT: NEW GROOVE INVESTMENT OROUP, 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:
RAUL DELGADO DE ARMAS Name of Person
RAUL DELGADO DE ARMAJ & ASSOCIATES
4000 PONCE DE LEON BLUD, SUITE 470 PA 3 TI
CURAL GABLES, FL 33146 City/State and Zip Code
Y OP I Galo O Y Oa law. Com Estimate address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ray R. Delcach de Armas at (30) 777-0432 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \text{S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \$\ \text{Certified Copy (additional copy is enclosed)} \end{array}

MAILING ADDRESS:

TO:

Registration Section

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**

NEW GROON (Name of the Limited	E INVE	ESTMENT ny as it now app liability Company	6RWP,	LLC rds.)		
The Articles of Organization for this Limited Liab Florida document number <u>L1100040</u>		were filed on _	04/01/2	.011	and as	ssigned
This amendment is submitted to amend the following	ng:			·		
A. If amending name, enter the new name of th	e limited liabi	ility company h	ere:			
NEW 6ROVE INVESTMENTE The new name must be distinguishable and end with the "L.L.C."			pany," the design	nation "LLC"	or the	abbreviation
Enter new principal offices address, if applicable	e:	1131	StillWake	Drive		
(Principal office address MUST BE A STREET ADDRESS)		Hiam:	Beach, Fl	33141	~	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) B. If amending the registered agent and/or in the second		N/A		LAHASSEE, FLORID	011 APR 13 PM 1: 08	
registered agent and/or the new registered office			our records,	enter the n	аше	or the new
Name of New Registered Agent:	NIA				· . · · · ·	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	NA				 -	
		Enter Florida street address				
		- C:	ida			
New Registered Agent's Signature, if changing Regi	stared Amont	City		Z_{ij}	ip Cod	e
A to a registered Agent a Signature, it changing Regi	Sicreu 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 Title Name **Type of Action** Address ☐ Add ☐ Remove Remove Remove Add ☐ Remove \square Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Altorney for Mair Valiente MGR. Atma) Exq. Alfa Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00