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SECRETÁRY OF STATE TALLAHASSEE, ELORIDA

J. SAULSBERRY EXAMINER APR 1 2 2011

COVER LETTER

TO:

TO:	Registration Se Division of Con		•				
SUBJE	ECT:	Brian and TF	RM Investment, LLC				
			ited Liability Company				
The end	closed Articles of	Amendment and fee(s) are sul	omitted for filing.				
Please i	return all correspo	ondence concerning this matter	to the following:				
	Robert L. King, Esq.			-			
			Name of Person				
			Firm/Company		<u>-</u>		
		278	30 E Oakland Park Blvd	-	_ 	2	
			Address		VITTA SECH	2011 APR 11	ر المراجع المارية
	Fort Lauderdale, FL 33306-1605				HAS	PR	Specialists .
			City/State and Zip Code		RY OF		
			RobtLKing@aol.com to be used for future annual report notifica	tion))FS	PH	in and the
For furt	ther information c	concerning this matter, please of	·	,	ORIDA	64:4 Hd	,.
		bbert L. King	at ()	61-5808			
	Name o	f Person	Area Code & Daytime T	elephone Numbe	er		
Enclose	ed is a check for t	he following amount:					
\$25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Sta	atus &	osed)
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brian and TRM I	nvestment, Ll	LC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	iny as it now appear Liability Company)	<u>'s on our records.</u>)	
The Articles of Organization for this Limited Liability Company	were filed on	April 6, 2011	and assigned
Florida document numberL11000040922			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company her	<u>e</u> :	
The new name must be distinguishable and end with the words "Lim	ited Liability Compa	ny," the designation	· ,
Enter new principal offices address, if applicable:		<u>.</u>	2011 # -SECH
· · · · · · · · · · · · · · · · · · ·			- 1
Principal office address MUST BE A STREET ADDRESS)			A A A A A A A A A A A A A A A A A A A
			
			FIST I
Enter new mailing address, if applicable:			F STATE
Mailing address MAY BE A POST OFFICE BOX)			2
If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on o e:	ur records, <u>ente</u>	r the name of the new
	_		
Name of New Registered Agent:			
New Registered Office Address:	7	(
	Eni	er Florida street d	<i>iuuress</i>
		, Florida	
	City		Zin Codo

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 simending 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>	Address	Type of Action
MGRM	Moshe Rouach	181 Broadway, 2nd Floor New York, NY 10007 US	Add Remove
			□ n
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information	, enter change(s) here: (Attach additional sheets, if nece	ZOII APR II PM 4:49 SELRETARY OF STATE ALLIAHA SEEF FLORIDA
Dated	April 7		
	<u>c:</u>	Notit 124	
	Signam	re of a member or authorized representative of a member	
		Robert L. King Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00