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T. HAMPTON

COVER LETTER

TO:	Registration So Division of Cop			
SUBJ	ЕСТ:	BISK INVEST M Name of Limited	1CMTS LLC 1 Liability Company	
The en	iclosed Articles of	Amendment and fee(s) are subm	itted for filing.	
Please	return all correspo	ondence concerning this matter to	the following:	
		THOMAS 6	BULY Ley TR Name of Person	
			Firm/Company	
		218 BRBUR	MEADUWS CT Address	
			TS ILMII UIS 626 City/State and Zip Code EY SI> CoGIN IHI Code be used for future annual report notification	
For fu	rther information c	concerning this matter, please call		
	THUIII Name o	1/14 13 UCKLey of Person	at (618) 2-3 5-60 8 Area Code & Daytime Te	81 Ce 4 8583 4 2 2 9047 Elephone Number
Enclos	sed is a check for t	he following amount:		
□ \$2:	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)
	MAIL	ING ADDRESS: FAX #	STREET/COURIER	ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TBJR INVEST MICH	TS LLC	
(Name of the Limited Liability ((A Florida Li	Company as it now appears (imited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Co	ompany were filed on	and assigned
Florida document number <u>L1100005989</u>		12 DEC
This amendment is submitted to amend the following:		19 19 19 19 19 19 19 19 19 19 19 19 19 1
A. If amending name, enter the new name of the limit	ed liability company here:	골 생활하
A WIHII STILLET FUND! L. The new name must be distinguishable and end with the word	h_C	· · · · · · · · · · · · · · · · · · ·
The new name must be distinguishable and end with the word "L.L.C."	ls "Limited Liability Company	," the designation "LLC" or the abbreviation
Enter-new principal offices address, if applicable:	218 ARBON	MEHOUS CT HTS IL 62208
(Principal office address MUST BE A STREET ADDRE	ESS) FAIRVIEW	HTS IL 62208
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	218 ARBOR	MIEADONSCT W 1+75 TL62208
B. If amending the registered agent and/or registeregistered agent and/or the new registered office addre		r records, enter the name of the new
Name of New Registered Agent:	e Jestha	Melegan
New Registered Office Address:		Ø
	Enter	· Florida street address
		, Florida
	City	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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MIZ	THUMAS GISLUK LEY	R NOCHANGE	Add
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	Signature of a member or authorized representative of a member
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_	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00

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