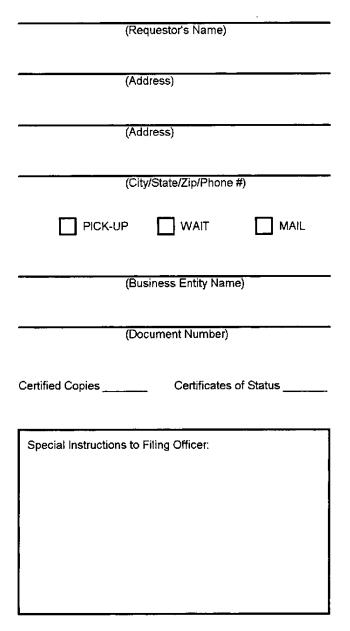
## L11000087625



Office Use Only



300212273163

09/26/11--01014--007 \*\*30.00

11 SEP 26 PH 12: 3

B. BOSTICK

SEP 2 8 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT:	DUTCHESS I	NVESTMENTS LLO	Ο,		
	Name of Lim	Name of Limited Liability Company			
The enclosed Articles o	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corres	condence concerning this matter	r to the following:			
		Susan Buffington			
Name of Person					
	DUTCH	IESS INVESTMENTS	LLC.		
		Firm/Company			
	2311 Gull Lane				
		Address			
		Sarasota Fl. 34237			
	- <del></del>	City/State and Zip Code		A = =	
		buffi64@msn.com		SEP "TI	
	E-mail address: (	to be used for future annual repor	t notification)		
For further information	concerning this matter, please of	call:		502 OD 6_	
	san Buffington	at (_941 )	685 2111	PHIZ: 37	
Name .	of Person	Area Code & D	Daytime Telephone Number	INTE MRIDA	
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is end	closed) Certified	e of Status &	

**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

Name of the Limited	JESS INVE	ny as it now appears on a	ur records \		-							
(A	Florida Limited I	ny as it now appears on o Liability Company)	<u>ar reçoras.</u>									
The Articles of Organization for this Limited Liability Company were filed on August 01, 2011 and assigned Clorida document number L11000087625  This amendment is submitted to amend the following:												
The new name must be distinguishable and end with "L.L.C."	the words "Limi		e designation	"LLC" or th	ne abbreviation							
Enter new principal offices address, if applica	ble:	2311 Gull Lane										
(Principal office address MUST BE A STREET	(ADDRESS)	Sarasota Fl. 3423	7		<del></del>							
				က်∸ င	S I							
Enter new mailing address, if applicable:				; T ;	च भी							
(Mailing address MAY BE A POST OFFICE B												
	<u> </u>			= 53	<del>မ</del> သ							
		<del></del>	······································	>								
B. If amending the registered agent and/or registered agent and/or the new registered offi			cords, <u>enter</u>	the name	of the nev							
Name of New Registered Agent:	Susan Buffington											
New Registered Office Address:												
Enter Florida street address												
	<del></del>	Sarasota	, Florida _	342								
		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 Changing Registered Agent, Signature of New Registered Agent

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

Title	Name	Address	Type of Action						
Mgr.	Christina Arrieta	2721 Cherbourg Rd. CoCoa, Fl. 32926	Add Remove						
Mgr.	Susan Buffington	2311 Gull Lane Sarasota Fl. 34237	/ Add Remove						
			Add Remove 	. <u>.</u> .					
<del></del>			Add Remove 						
<u> </u>	<del></del>		Add Remove						
	14-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		Add Remove						
D. If amendin	g any other information, enter change		11 SEP 26	TORRESON OF THE TORRESON OF T					
		T C C S I D A	PHI2: 37						
Dated	9/2 , 20								
_		or authorized representative of a member	<del></del>						
Christina Arrieta Typed or printed name of signee									

Page 2 of 2

Filing Fee: \$25.00