## L11000097560

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DIVISION OF CORPORATIONS

12 FFR 20 PM 3: 11

FEB 2 1 2012

T. HAMPTON

## **COVER LETTER**

TO:

TO:	Registration Section Division of Corpo					
SUBJE	CĆT:	GR INVESTMENTS HOLDINGS LLC				
		Name of Limi	ted Liability Company			
	V					
The en	closed Articles of Ar	mendment and fee(s) are sub	omitted for filing.			
Please	return all correspond	ence concerning this matter	to the following:			
			YOSEF Y KANNER			
			Name of Person			
		FLO	ORIDA STATE TRUST			
			Firm/Company	-		
			PO BOX 820			
			Address			
		HZ	ALLANDALE FL 33009			
City/State and Zip Code						
y@floridastatetrust.com						
		E-mail address: (	to be used for future annual report not	ification)		
For fun	ther information con	cerning this matter, please c	eall:			
	Yose	f Y Kanner	at ( 717 )	467-1680		
<del>,</del>	Name of P	erson	Area Code & Daytin	me Telephone Number		
	ed is a check for the	following amount:	\$55.00 Filing Fee &	\$60.00 Filing Fee,		
<b>▼</b>	.oo Pang Pee	Certificate of Status	Certified Copy (additional copy is enclose	Certificate of Status &		
	MAILIN	G ADDRESS:	STREET/COUR	UER ADDRESS:		
		on Section of Corporations	Registration Sect. Division of Corpo			
	P.O. Box	6327	Clifton Building			
	i alianassi	ee, FL 32314	2661 Executive C	enter Circle		

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT

## TO SECRETARY OF STATE ARTICLES OF ORGANIZATION DIVISION OF CORPORATIONS OF

12 FEB 20 PM 3: 11

GR Invest (Name of the Limited Liability (A Florida)	tments Holdings LLC  Company as it now appears on our records.  Limited Liability Company)		
The Articles of Organization for this Limited Liability C Florida document numberL11000097560	Company were filed on Aug. 25, 2011 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDI	RESS)		
•			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office add	tered office address on our records, enter the name of the new ress here:		
Name of New Registered Agent:			
New Registered Office Address:	Euton Elouida etaest adduses		
	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</u>, <u>name</u>, <u>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
MGR .	REGGEV, GAD	10860 SW 25TH STREET DAVIE FL 33324	Add 7 Remove
MGR	CAPE TOWN LLC	10860 SW 25TH STREET DAVIE FL 33324	Add Remove
·			Add Remove
<del>*</del>			Add Remove
	<del></del>		Add Remove
	. <del></del>		Add Remove
D. If amen	ding any other information, e	nter change(s) here: (Attach additional sheets, if necessary.)	SECRETAR DIVISION OF C 12 FEB 20
  Dated	February 17		PM 3: 11
	Signature o	Yosef Y Kanner	
		Typed or printed name of signee	<del></del>

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