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AULAHASSEE, FLORIDA

COVER LETTER

TO:	Registration S Division of Co			
SUBJI	rct.	20 UNITS I	NVESTMENT, LLC	
30001	EC1		ited Liability Company	
		Amendment and fee(s) are su		•
Please	return all corresp	ondence concerning this matte	r to the following:	
		GREG K GONZALEZ, CPA Name of Person		
		GREG	S K GONZALEZ, CPA, P.A.	7 (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
	Firm/Company			28 PZ HAY
	5201 BLUE LAGOON DR. SUITE 800		() () () () () () () () () ()	
	•		Address	ines — { }
	MIAMI, FL. 33126 City/State and Zip Code		SYATE LORID	
		GREG@	GREGGONZALEZCPA.COM (to be used for future annual report notifical	
For fu	rther information	concerning this matter, please	•	ion)
		GONZALEZ, CPA		629-3569
	Name	of Person	Area Code & Daytime T	elephone Number
Enclos	ed is a check for	the following amount:		
₹ \$25	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, FL 32314	STREET/COURIEF Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20 UNITS IN	<u>IVESTMENT, LL</u>	<u>.C</u>		
(<u>Name of the Limited Liability C</u> (A Florida Lim	ompany as it now appea lited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Com Florida document number L11000120648	npany were filed on	10/20/2011	_ and assign	ned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	d liability company he	<u>re</u> :		
YTECH INTERNATIONAL	-20 UNITS INVEST	MENTS, LLC		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Comp	any," the designation "LL	C" or the abb	previation
Enter new principal offices address, if applicable:				<u>_</u>
(Principal office address MUST BE A STREET ADDRES	(22)]]>	1.4 20	
		· +		* *** ****
		The state of the s		Gradery daystanicy
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·	<u>ξ</u> ω	<u>}</u>
(Mailing address MAY BE A POST OFFICE BOX)			(S) TO	
	· · · · · · · · · · · · · · · · · · ·		W	M ₁₋₄ ,
			20	•
B. If amending the registered agent and/or register		our records, enter the	e name of	the nev
registered agent and/or the new registered office addres	ss nere:			•
Name of New Registered Agent:				
New Registered Office Address:		***************************************		
	E	nter Florida street addre	SS	
·	,	, Florida	- 4	
	City	i	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u> </u>			Add Remove
			D-man
			Add Remove
			H DAdd
			Tip and the state of the state
D. If amend	ling any other information, enter chai	nge(s) here: (Attach additional sheets, if nec	
Dated	05/16/2012	lidin	
	V	er or authorized representative of a member YAMAL YIDIOS ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00