L11 000 129988

(Re	questor's Name)	
(Ad	dress) -	
•	•	
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(Ad	dress)	
(Cit	y/State/Zip/Phone#	9
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	Certificates o	of Statue
Ceranea Copies	_ Certificates o	or Status
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Office Use Only



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03/02/14--01017--021 **25.00

COVER LETTER

SUBJECT: 13US	H Investment Name of Limited Lia	thility Company	-
The enclosed Articles of A	mendment and fee(s) are submitted	for filing.	
Please return all correspond	dence concerning this matter to the	following:	
	CURT M	5U5H	
		Name of Person	
		Firm/Company	
	POBOX 25	578	
	POBOX 25 Seattle, WA	Address 9 8 / 6 5 -	
	City	/State and Zip Code	
	E-mail address: (to be w	sed for future annual report notification)
For further information cor	ncerning this matter, please call:		
CURT BO	/ <u>S</u>] +	at (3-06) S-17 - 4° Area Code Daytime Telep	79 9 hone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ Secretificate 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)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

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

- BUSH Investmen		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.)	
(**************************************	ic blasmy company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on NOV 14	201 and assigned
Florida document number <u>L1100()1)9988</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ahility company here:	·
The new name must be distinguishable and end with the words "Limited L	inhility Commany." the designation "LLC" or th	ne abbreviation "L.I.C."
•		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered	office address on our records, ente	er the name of the new
registered agent and/or the new registered office address h		
Name of New Registered Agent:		c. 4
Patric of New Registered Figure.		- 17
New Registered Office Address:		1 113
	Enter Florida street address	42 10 73
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Age	<u>et:</u>	: D3

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 605, 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

H amending the Managers or Anthorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Mai AMBR = Aut	nager horized Member				
<u>Title</u>	<u>Name</u>		Address		Type of Action
MGR	William	Maddox	16846	Arrow Head	B/ LA Add
			Winter	Arrow Head	34787
					
					☐ Remove
					
					C Remove
AMARIA SARI PARLE PROVINCE	,			7. · · · · · · · · · · · · · · · · · · ·	□ Add
					Remove
				:	□ Add
				;	Remove
	***************************************				Add
					Remove
				•	

if an	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ı	
Effe	ective date, if other than the date of filing:
(The e	effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
the c	date this document is filed by the Florida Department of State)
Date	ed HU 26 1. 2014.
	Signature of a member or authorized representative of a member
	- B
	CURT BUSH

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Filing Fee: \$25.00