L11000 132145

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JAN -2 2013 T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

Investment Group One, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Person

Firm/Company

4800 North Federal Hwy, Suite 200E

Address

Boca Raton, FL 33431

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ronit Dery

_{at}(561)392-4800

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 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)

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



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Investment Group One, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our rec Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability of Florida document number L11000132145	Company were filed on 011/21/2011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," the design	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	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 ade	stered office address on our records dress here:	, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		······································
	Enter Florida s	treet address
		orida
	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager. MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR	BNK Real Estate, LLC	4800 North Federal Hwy, Suite 200	E Add
		Boca Raton, FL 33431	Remove
MGRM	Family Investment Group One, LLC	5373 N. Nob Hill Road	Add
		Sunrise, FL 33351	Remove
			Add
			Remove
			Add
		<u></u>	Remove
			12 DE 0.28
			Remove
			Add
			Remove

). If amending any other informati	ion, enter change(s) here: (Attach additional sheets, if necessary.)
. 	
December 27	
	la gabal
Sign	ature of a member or authorized representative of a member
Abida Iqbal	
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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