

L11000136883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

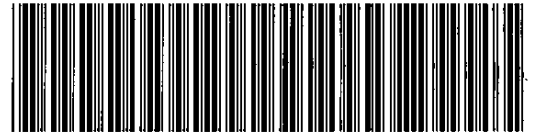
Special Instructions to Filing Officer:

A. LUNT

DEC -9 2011

EXAMINED

Office Use Only



400214847424

12/08/11--01010--008 **25.00

FILED
2011 DEC -8 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ROBERT P. SALTSMAN, P. A.

Attorney at Law

222 SOUTH PENNSYLVANIA AVENUE, SUITE 200
WINTER PARK, FLORIDA 32789
TELEPHONE: (407) 647-2899
TELEFAX: (407) 628-2307

POST OFFICE BOX 2146
WINTER PARK, FLORIDA 32790
WRITER'S E-MAIL ADDRESS:

aimee@saltsmanpa.com

December 7, 2011

Via Federal Express

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

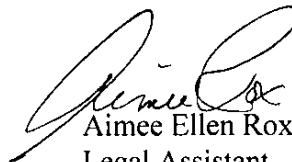
Re: **Amendment to Articles – Barnes Investments, LLC**

Dear Sir/Madam:

Enclosed is the Amendment to Articles of Organization for Barnes Investments, LLC along with check number 1233 in the amount of \$25.00 for the filing of same.

If you need anything further from us, please feel free to contact me. Thank you for your assistance.

Sincerely,


Aimee Ellen Rox
Legal Assistant

:aer
Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BARNES INVESTMENTS 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:

ROBERT P. SALTSMAN

Name of Person

ROBERT P. SALTSMAN, P.A.

Firm/Company

222 S. PENNSYLVANIA AVE., STE. 200

Address

WINTER PARK, FL 32789

City/State and Zip Code

AIMEE@SALTSMANPA.COM

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

2011 DEC -8 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

ROBERT P. SALTSMAN

Name of Person

at (407) 647-2899

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**

BARNES INVESTMENTS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on DECEMBER 5, 2011 and assigned
Florida document number L11000136883.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

BARNES CAPITAL INVESTORS, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.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)

FILED
2011 DEC -8 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

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 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> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|---|
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

2011 DEC -8 11:00
 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated DECEMBER 7, 2011

 Signature of a member or authorized representative of a member
 JAMES T. BARNES, JR.

 Typed or printed name of signee