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## **COVER LETTER**

TO;	Registration Section Division of Corporations		
SUBJE	CT: FOREVER TRUST PROPERTY INVESTMENT LLC Name of Limited Liability Company	· -	
The end	closed Articles of Amendment and fee(s) are submitted for filing.		
Please i	return all correspondence concerning this matter to the following:		
	LANA DUONG Name of Person		
	Firm/Company		
	1818 W. WATERS AVE Address	2012 JAN 3L BAR TALLAH	····
	TAMPA, FL. 33604 City/State and Zip Code	2012 JAN 17 BM 14 09 SLEAS MAY BY STASS TALLAHASSES, FLORUS	
	TNLTRAVELING @ GMAIL COM  E-mail address: (to be used for future annual report notification)	- 109 STATE	,
For furt	her information concerning this matter, please call:		
<u>la</u>	A DUONG at (813) 786- 4232.  Name of Person Area Code & Daytime Telephone Num	ber	
Enclose	ed is a check for the following amount:		
\$25.	Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certificate of Status	Filing Fee, icate of Status & ied Copy is enclosed to the copy is enclosed to	osed)
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  MAILING ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	:	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FOREVER TRUST DROPE (Name of the Limited Liability C (A Florida Lir	ENTY TOVI Company as it now ap mited Liability Compan	pears on our records.)	<u>LC</u>	
The Articles of Organization for this Limited Liability CorFlorida document number		Dec-27,2	<i>0 / ∕</i> and assig	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	ed liability company	here:		
FOREVER TRUST LLC The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Co	ompany," the designation	n "LLC" or the ab	breviation
Enter new principal offices address, if applicable:	····		至 23	<del></del>
(Principal office address MUST BE A STREET ADDRE	<u>SS)</u>		<del>\</del>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			AN 17 BM 409	
B. If amending the registered agent and/or register registered agent and/or the new registered office addre		on our records, ente	r the name of	the new
Name of New Registered Agent:				<del></del>
New Registered Office Address:		Enter Florida street o	address	
		, Florida		
	City		Zip Code	
New Registered Agent's Signature if changing Registered .	A gent.			

If Changing Registered Agent, Signature of New 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.

16 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 =	MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			Add Remove		
	·		Add Remove		
			Add Remove		
			Add Remove		
<del></del>			Add Remove		
	/		Add Remove		
D. If ame	nding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	2012 JAN 17		
- -			7 84 × 09		
Dated	01/11/2012	·	<b>—</b>		
		or authorized representative of a member			
	LAN DUONG Typed	or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00