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EXAMINER



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03/26/12--01042--004 **25.00

DIVISION OF COMPORATIONS
12 HAR 26 AM 8: 27

COVER LETTER

TO: Registration S Division of Co		1	
SUBJECT: 7NVE	STIGATIVE DYNA Name of Limi	amics LLC	
	Name of Limi	ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	•
Please return all corresp	ondence concerning this matter	to the following:	to an analysis of the state of
	REWALDO	CANATAL Name of Person	AR 25 COLUMN
	INVESTIGATI	VE DYNAMICS LL Firm/Company	12 HAR 26 AH & 27
	18760 NW	79 PLACE Address	
	MIAMI, FL.	33015 City/State and Zip Code Z	
	IDYNAMIC. E-mail address: (1 O YAHOO. COM to be used for future annual report notifica	tion)
For further information	concerning this matter, please of	all:	
REINALDO Name	CARNAJIAL of Person	at (<u>305) 586 - 56</u> Area Code & Daytime T	elephone 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

INVESTIGATIVE ,	DYNAMICS C	<u> </u>	<u>م کرت</u>
(Name of the Limited Liabilit (A Florida	y Company as it now appears Limited Liability Company)	on our records.)	7 550
		•	畫部
The Articles of Organization for this Limited Liability	Company were filed on	17/12	and assigned
Florida document number L /20000069	16		# 000
			0 27
This amendment is submitted to amend the following:			2 2
A. If amending name, enter the new name of the lin	nited liability company here	1	
The new name must be distinguishable and end with the wo	ords "Limited Liability Compan	v" the designation "LLC"	or the abbreviation
"L.L.C."	ords Elithica Elability Company	,, the designation 220	
Enter new principal offices address, if applicable:	NIA		
(Principal office address MUST BE A STREET ADD.	RESS)		
Enter new mailing address, if applicable:	_ N/A		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regis		r records, enter the	name of the new
registered agent and/or the new registered office add	<u>dress here</u> :		
Name of New Registered Agent:	wln		
rante of they registered rigent.			· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:			
	Enter Florida street add		
		, Florida	
	City		Lip 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>	Address	Type of Action
MURM	REI A. CARVATAL	18760 NW 75 PLACE MIANII, FL 33015	Add Greenove
			Add Remove
	**************************************		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter cha	nge(s) here: (Attach additional sheets, if necessary.)	_
			<u> </u>
Dated		ber or authorized representative of a member	
		ARVA TAL ped or printed name of signee	<u>-</u>
	Tvo	ped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00