## L1200000 8121

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SECRETARY OF STATE

D. BRUCE
JUL 17 2012
EXAMINER

## COVER LETTER

TO: Registration Se Division of Cor					
SUBJECT:		ESTMENTS LLC ted Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspondence	ondence concerning this matter	to the following:			
		BEITLICH Name of Person INFLITMENTS LLC			
		Firm/Company	(		
	1740 LITHE	POINT CIRCLE	SEC	12	
		Address	AH		
	SARASOTA	FL 34231 City/State and Zip Code	SECRETARY OF STATE ALLAHASSEE. FLORID.	12 JUL 16 PM 12: 38	FA
		City/State and Zip Code VESTMENTS.COM	THO:	<b>X</b>	
		to be used for future annual report notification)	STA	<u>.</u>	
For further information c	oncerning this matter, please c	all:	<u> </u>	8	
PAUL BE		at ( <u>941)</u> (153 <u>810</u> Area Code & Daytime Telepho	3 one Number		
Enclosed is a check for the	ne following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is encl	losed)	
	ING ADDRESS: ation Section	STREET/COURIER AD Registration Section	DRESS:		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	JUESTMENTS	LLC			
(Name of the Limited Liabilit (A Florida	y Company as it now appears on ou Limited Liability Company)	<u>r records.</u> )			
The Articles of Organization for this Limited Liability C Florida document number <u>L120000 8121</u>	Company were filed onO \int\langle 	8/2012	and assign	ed	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lim	ited liability company here:				
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Company," the	e designation "LLC"	or the abbr	eviati	on
Enter new principal offices address, if applicable:			SEO	12	
(Principal office address MUST BE A STREET ADD	RESS)		<u> </u>		
			ASS	<u></u>	
		,	Υ O	ر رون	E S
Enter new mailing address, if applicable:			70	<u>2</u>	
(Mailing address MAY BE A POST OFFICE BOX)		ų.	ŽŽ	<u></u>	-
			3.4		
B. If amending the registered agent and/or registered agent and/or the new registered office add  Name of New Registered Agent:		cords, <u>enter the</u> 1	name of th	he ne	<b>ew</b>
New Registered Office Address:					
THE PROPERTY OF THE PROPERTY O	Enter Florida street address				
	, Florida				_
	City	Z	ip 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager

MGRM = Managing Member **Title** <u>Name</u> **Address Type of Action** Annelien Bruins MGR Apt 33E 420 W 42nd Street Add Add Remove ☐ Add ☐ Remove Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated\_ Signature of a member or authorized representative of a member AJA Haddon Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00