## L12000048057

(Re	equestor's Name)	
· (Ac	ldress)	
(Ac	dress)	
(Cit	ty/State/Zip/Phone	∋ #)
•	•	,
PICK-UP	☐ WAIT	MAIL
	·	
(Bu	isiness Entity Nar	ne)
(Do	cument Number)	·
· ·	,	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800258404738

04/03/14--01001--008 \*\*250.00

B. BOSTICK

APR - 4 2014

**EXAMINER** 

March 26, 2014

FL Dept. of State
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Articles of Amendments

To Whom It May Concern,

Enclosed you will find Check #2411 in the amount of \$250.00 for the following (10 @ \$25 ea.) Articles of Amendment:

Rod Holdings, LLC	L05000092747
Woodmere Investment Management, LLC	L06000005199
Woodmere Realty Advisors, LLC	L11000003024
Woodmere Capital Group, LLC	M11000005951
New Bern Investments Management, LLC	L12000047676
New Bern Lender, LLC	L12000047699
New Bern Investments, LLC	L12000048057
New Bern Lender Management, LLC	L12000047688
New Bern Investment Phase II, LLC	L13000162951 (Incls EIN)
H & S Hytop, LLC	L08000075812

These Articles of Amendment are simply to change the Registered Agent to myself. I have also provided the EIN# for New Bern Investments Phase II, LLC which was previously applied for.

If you have any questions or need additional information please do not hesitate to contact me.

Sincerely,

Henry Roartguez

## **COVER LETTER**

TO: Registration Section Division of Corporation						
SUBJECT: New B	ern Investme	ents, LLC				
Subject.	Name of Lim	ited Liability Company				
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.				
Please return all correspond	ence concerning this matter	to the following:				
	Henry Rodri	guez				
		Name of Person				
	New Bern In	vestments, I	_LC			
		Firm/Company				
	P.O. Box 57	9				
		Address				
	Osprey, FL	34229				
	· <del></del>	City/State and Zip Code	;-		27.75	
	hrodriguezsdc@d				:-:	
	E-mail address: (	to be used for future annual re	port notification)		: -	•
For further information con	cerning this matter, please ca	all:		,	1.0	
Brenda Cree	ech	<sub>a</sub> ,941,31	2-5996  Daytime Telephone Number		- 3	
Name of P	erson	Area Code	Daytime Telephone Number	• ,	- (J	
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	□ \$60.00 Fil Certificat	_		

**MAILING ADDRESS:** 

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

## STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

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

(additional copy is enclosed)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

New Bern Investments, LI			
(Name of the Limi	ted Liability Company as it now a (A Florida Limited Liability Compa	ppears on our records.) any)	
The Articles of Organization for this Limited L Florida document number L12000048057	iability Company were filed o	n 04/06/12	and assigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name o	of the limited liability compar	ay here:	
The new name must be distinguishable and end with the	words "Limited Liability Company,	"the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applic	cable:	<u> </u>	
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:		• ,	2015
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
		, .	1
B. If amending the registered agent and registered agent and/or the new registered o		s on our records, enter t	he name of the nev
registered agent and/or the new registered o	mice address here.	• . • .	
Name of New Registered Agent:	Henry Rodriguez	-	
New Registered Office Address:	1561 Harbor Drive		
<u> </u>	Ente	er Florida street address	
	Sarasota	, Florida <u>342</u>	239
	City		Zîp 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, Whereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = A	AMBR = Authorized Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action	
			Add	
			□ Remove	
	<del></del>		□ Add	
			□ Remove	
	····		□ Add	
			☐ Remove	
			Add	
			Remove	
			——————————————————————————————————————	
			□-Add	
			□ Remove	
			□ Add	
			Remove	

	· · · · · · · · · · · · · · · · · · ·
a e e	
Effective date, if other than the date of factories the effective date must be specific, cannot be prior the date this document is filed by the Florida Department	to date of receipt or filed date and cannot be more than 90 days after rtment of State)
Dated March 36	J-2014/.
	of a member or authorized representative of a member
Henry Rodriguez	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

D & B