## 12000/06531

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EXAMINER

## **COVER LETTER**

10.	Division of Cor					
SUBJE	CT·	LAG INVEST	MENTS 2012, LLC			
SUDJE	C1		ted Liability Company	<del></del>		
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please r	eturn all correspo	ondence concerning this matter	to the following:			
			ROGER A. LOPEZ			
			Name of Person			
		BENTL	EY INVESTMENT GROU	IP		
			Firm/Company			
			PO BOX 266191			
			Address			
			WESTON, FL 33326	• • • • • • • • • • • • • • • • • • • •		
		BOGE	City/State and Zip Code RL@NENGLANDINC.CO	M	2	FINAL FINE
		E-mail address: (	to be used for future annual report no	tification)	The state of the s	
For furt	ther information of	concerning this matter, please o	call:		88 - S	P-6
		GER A. LOPEZ	at (_954_)	8012747	71	
	Name o	of Person	Area Code & Dayti	ime Telephone Number		
Enclose	ed is a check for t	he following amount:				
\$25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclos	ed) Certified	te of Status	
	Regist Divisi P.O. B	ING ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COU! Registration Sec Division of Corp Clifton Building 2661 Executive of Tallahassee, FL	oorations Center Circle		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LAC INIVESTMENTS 2012 LLC

(Name of the Limited Liab (A Flor	illity Company as it now appear ida Limited Liability Company)	rs on our records.)	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
The Articles of Organization for this Limited Liabilition of Lipidia document numberL12000106531		08/20/2012	and assigned
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company her	<u>·e</u> :	
The new name must be distinguishable and end with the 'L.L.C."	words "Limited Liability Compa	nny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable		_	
(Principal office address MUST BE A STREET A	DDRESS)		TES
	- Addition to a state of the control		A P
			第 6
Enter new mailing address, if applicable:		<u>.</u>	700
(Mailing address MAY BE A POST OFFICE BOX	2	·	
			उँल ए
B. If amending the registered agent and/or registered agent and/or the new registered office  Name of New Registered Agent:		our records, <u>enter t</u>	he name of the new
New Registered Office Address:	<b>***********</b>		· · · · · · · · · · · · · · · · · · ·
	Enter Florida street address		
<del>-</del>		, Florida	
	Citv		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>	Address	Type of Action
MGR	ALFUZZI, OSCAR	7900 HARBOR ISLAND DR # A-825 NORTH BAY VILLAGE FL 33141	Add Remove
MGR	GERARDI, LUIS MANUEL	7900 HARBOR ISLAND DR # A-825 NORTH BAY VILLAGE FL 33141	✓ Add ☐ Remove
	<u></u>		Add Remove
			Add Remove
<u></u>	<del></del>		Add Refflore
			Add:
D. If amen	ding any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary.)	v'\ <b>∪α</b> ν
	SEPTEMBER 1st	2012	
Dated	<u> </u>	2012	
	Signature of a mer	mber or authorized representative of a member	
		ROGER A. LOPEZ	
	Ty	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00