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| (Re | equestor's Name) | | | | | | |
|---|--------------------|------|--|--|--|--|--|
| (Address) | | | | | | | |
| (Address) | | | | | | | |
| (Cit | ty/State/Zip/Phone | e #) | | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | | | |
| (Bu | isiness Entity Nan | ne) | | | | | |
| (Document Number) | | | | | | | |
| Certified Copies Certificates of Status | | | | | | | |
| Special Instructions to Filing Officer: | | | | | | | |
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C. LEWIS SEP 2 4 2012 **EXAMINER**

COVER LETTER

| TO: Registration Sec Division of Corp | | | | | | |
|--|---|--|--|--|--|--|
| ·». SUBJECT: | 5801 INVESTMENTS LLC | | | | | |
| 303,001. | Name of Limited Liability Company | | | | | |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. | | | | | | |
| Please return all correspon | ndence concerning this matter to the following: | | | | | |
| | Valdete Fontana Name of Person | | | | | |
| Name of Person | | | | | | |
| | 5801 Investment UC Firm/Company | | | | | |
| | \cdot | | | | | |
| | 1910 NE ZZ Ter | | | | | |
| Address . | | | | | | |
| Fort hauderdale, FL 33305 | | | | | | |
| Fort hauderdale, FL 33305 City/State and Zip Code valdetefontana e hotmail.com E-mail address: (to be used for future annual report notification) | | | | | | |
| For further information co | oncerning this matter, please call: | | | | | |
| Voldeta Name of | e Fontana at (954) 658.9809 Person Area Code & Daytime Telephone Number | | | | | |
| | •• | | | | | |
| Enclosed is a check for the | e following amount: | | | | | |
| \$25.00 Filing Fee | \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) 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 ARTICLES OF ORGANIZATION **OF**

SECRETARY OF STATE DIVISION OF CORPORATIONS

2012 SEP 2 | PM 12: 50

| 580 (Name of the Limited Li (A F) | 1 INVESTI ability Compan orida Limited Li | MENTS LLC y as it now appears of tability Company) | n our records.) | | | |
|---|---|---|-------------------|---------------------------------------|--|--|
| The Articles of Organization for this Limited Liab Florida document numberL120001119 | | were filed on | 08卯0月口 | and assigned | | |
| This amendment is submitted to amend the follow | ing: | | | | | |
| A. If amending name, enter the new name of the | ne limited liabi | lity company here: | | | | |
| The new name must be distinguishable and end with t "L.L.C." | he words "Limit | ed Liability Company, | " the designation | "LLC" or the abbreviation | | |
| Enter new principal offices address, if applicab | | 19.10 N | E 22 Te | le, FL 33305 | | |
| Enter new mailing address, if applicable: | | | | · · · · · · · · · · · · · · · · · · · | | |
| (Mailing address MAY BE A POST OFFICE BO | <u> </u> | ** | | | | |
| B. If amending the registered agent and/or registered agent and/or the new registered offic | e address here | : | | | | |
| Name of New Registered Agent: | Valc | lete Fon | tana | | | |
| New Registered Office Address: | Valdete Fontana 1910 NE. 22 Terrace Enter Florida street address | | | | | |
| | Enter Florida street address Fort Lauderdele, Florida 33305 City Zip Code | | | | | |
| <u>-</u> | tort La | <u>auderdale</u> | , Florida _ | 33305 | | |
| N. D. L. LA GO W. L. S. | | - | | Zip Code | | |
| New Registered Agent's Signature, if changing Reg | istered 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** Address **Type of Action** Name Valdete fontana 1910 NE 22 Ter HAdd Fort Lauderdal & L 33305 Remove 499 E Sheridan St # 205 □ Add Dania Zeach, FL 33004 □ DRem RA Caravel Real Estate 499 E Sheridan St #205 1 .dd MGR Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 17, 2012. Signature of a member or authorized representative of a member Valdete Fontana Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00