

L120001/3997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

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(Business Entity Name)

(Document Number)

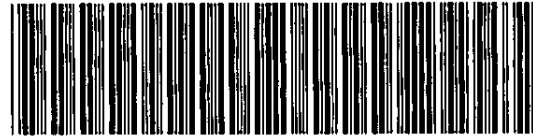
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APR 18 2013

A. LUNT

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04/15/13--01020--008 **25.00

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Portfolio Investors LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Chad Von Dette

Name of Person

Portfolio Investors LLC

Firm/Company

13236 Fountain Bleau Drive

Address

Clermont, FL 34711

City/State and Zip Code

chad@chadvondette.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chad Von Dette

Name of Person

407 205-3068

Area Code & Daytime Telephone 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)

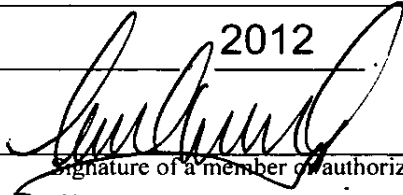
MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated April 9

2012



Signature of a member or authorized representative of a member

Chad Von Dette

Typed or printed name of signee

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Filing Fee: \$25.00