42000118595

(Re	questor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



800241480768

11/26/12--01030--011 **25.00

12 NOV 26 PM 4: 15

N. Cuttigen NOV 2 7 2012

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

SOBTEC INVESTMENTS, 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:

JESSICA ROMERO

Name of Person

SOBTEC INVESTMENTS, LLC

Firm/Company

701 SUNFLOWER CIRCLE

Address

WESTON, FLORIDA, 33327

City/State and Zip Code

INFO@SOBTEC.NET

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

For further information concerning this matter, please call:

JESSICA ROMERO

_{3,6}954、2002377

Name of Person

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)

"lie"

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 TO ARTICLES OF ORGANIZATION **OF**

FILED

12 NOV 26 PH 4: 15

SOBTEC INVESTMENTS, LLC

(Name of the Limited Liability Company as it now appears on our records.) AHASSET OF STATE

(A)	riorida Elimied Liability Compa	any)	-MINISSEE, FLORIDA
The Articles of Organization for this Limited Lia Florida document number L12000118595	bility Company were filed or	09/17/2012	and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liability compan	<u>y here</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability C	Company," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	30X)		
B. If amending the registered agent and/oregistered agent and/or the new registered off Name of New Registered Agent:		on our records, <u>ent</u>	er the name of the nev
	701 SUNFLOWER CI	IRCLE	
New Registered Office Address: 701 SUNFLOWER CIRCLE Enter Florida street address			address
	WESTON	, Florida	33327
	City		Zip Code
New Registered Agent's Signature, if changing R	egistered 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.

I Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 T	ype of Action
MGRM	JAVIER E ROMERO	701 SUNFLOWER CIRCLE	Add
		WESTON, FLORIDA	Remove
		33327	
MGRM	SAVERINA V VITTORINO	701 SUNFLOWER CIRLCE	Add
		WESTON, FLORIDA	Remove
		33327	
MGRM	JAVIER V ROMERO	107 NW 133RD AVE, UNIT 35-101	Add
		PLANTATION, FLORIDA, 33325	Remove
			Add
			Remove
			Add
			Remove
		- <u></u> -	Add
			Remove

D. If at	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	······································
	,
Dated_	NOVEMBER 15 2012
	
	Signature of a member or authorized representative of a member
	JESSICA ROMERO
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

12 NOV 26 PH 4: 15