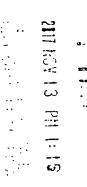
## 42000123151

	(Requestor's Name)
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PICK-U	JP WAIT MAIL
	(Business Entity Name)
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Special Instruction	ns to Filing Officer:
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## **COVER LETTER**

Division of C	Corporations		
SUBJECT:	690 AMADOR Name of Limit	LANE 1 L	1C
The enclosed Articles	of Amendment and fee(s) are subm	nitted for filing.	
Please return all corre	spondence concerning this matter to	the following:	
	ROBER	Name of Person	- D
		Firm/Company	
	241	BRADLEY Address	PL
	PALM RSFI	BEACH, FL City/State and Zip Code ELD & GMAIL be used for future annual report noti	- 33480 com
For further information	n concerning this matter, please cal		Transity
ROBER	T S. FIELD ne of Person	at ( <u>561</u> ) <u>459</u> Area Code Daytim	2 7 7 0 e Telephone Number
Enclosed is a check for	or 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:

TO:

Registration Section

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

690 AMADOR	
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L1200012315</u> 1	vere filed on $9/26/12$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
DISCOVERY INVEST	TORS LLC
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A ===
(Principal office address MUST BE A STREET ADDRESS)	: 61
Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered offire registered agent and/or the new registered office address here:	
Name of New Registered Agent:	NA
New Registered Office Address:	/
	Enter Florida street address
	, Florida City Zip Code
	City Zip Code
New Registered Agent's Signature, if changing Registered Agents	

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, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	ROBERT S. FIELD	309 TIMBERWOOD CT	Add
		PALM BEACH GARDENS FL 33418	Remove
		FL 33418	Change
			Remove
			Change
			□ Add
			□ Remove
			Change
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		· .	 ☐ <mark>Gi</mark> ange
			□ Add
			_□ Remove
			_☐ Change

Effective date, if other than the date of filing:  [If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 695,0267  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The 90th day after the record is filed.  Dated  1			
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed.  Dated    Colf   Colf		N/H	
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The 90th day after the record is filed.  Dated	Goedinent 5 (	rective date on the Department of State's records.	
Signstaire of a member or authorized representative of a member  ROBERT S. FIELD  Typed or original name of signers			. on the earlier of
ROBERT S. FIELD	Dated	11/6, 2017.	22 1. C
ROBERT S. FIELD			17 11
ROBERT S. FIELD	_	Significant a member of authorized representative of a member	
ROBERT S. FIELD  Typed or printed name of signee			
Typed or printed name of signee		ROBERT S. FIELD	
	_	Typed or printed name of signee	<del></del>

Page 3 of 3

Filing Fee: \$25.00