3000014072

(Re	equestor's Name)	
(Ac	ddress)	
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C. LEWIS
FEB 2 6 2013
EXAMINER

COVER LETTER

TO:

Registration Section — Division of Corporations

SUBJECT: YOICHI INVESTMENT GROUP 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:

RAMON A MONCLUS URENA

Name of Person

Firm/Company

12855 SW 136TH AVE STE 205

Address

MIAMI FL 33186

City/State and Zip Code

RMONCLUS@YOICHIGROUP.COM

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

For further information concerning this matter, please call:

RAMON MONCLUS

786, 280-2740

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)

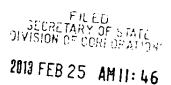
MAILING ADDRESS:

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



YOICHI INVESTMENT GROUP LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(,	N/ 00 0040
The Articles of Organization for this Limited Liability Company	were filed on JANUAH	1Y 28, 2013 and assigned
Florida document number <u>L13000014072</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the	designation "LLC" or the abbreviatio
Enter new principal offices address, if applicable:	12855 SW 136TH AVE STE 205	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI FL 33186	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ords, <u>enter the name of the nev</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address , Florida City Zip Code	
<u> </u>		
		Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr	ee to act in this capacity.	I further agree to comply with

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:

| FILED | SECRETARY OF STARE

MGR = Manager MGRM = Managing Member		SIVISION OF CORFORATION		
<u>Title</u>	Name	2013 FEB 25 AMII: 46 Address	ype of Action	
MGRM	LUIS F MONCLUS	15371 SW 114 TERR	Add	
		MIAMI FL 33196	Remove	
MGRM	RICHARD MANGAS	15006 SW 104TH STM# 2510	Add	
		MIAMI FL 33196	Remove	
MGRM	ALCIDES DAVILA	PO BOX 311045	Add	
		MIAMI FL 33231	Remove	
MGR	LUIS F MONCLUS	15371 SW 114 TR	Add	
		MIAMI FL 33196	Remove	
MGR	RICHARD MANGAS	15006 SW 104TH STM# 2510	Add	
		MIAMI FL 33196	Remove	
MGR	ALCIDES DAVILA	PO BOX 311045	Add	
		MIAMI FL 33231	Remove	

D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if nece	ssary.)
		SECRETARY OF STATE 2013 FFD 0 = 2013 FFD 0
		2013 FEB 25 AM 11: 46
		AFT 1: 46
		
Dated FE	BRUARY 21 . 2013	
	K-12	
	Signature of a member or authorized representative of a member	.
	RAMON A MONCLUS URENA	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00