

L13000032700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

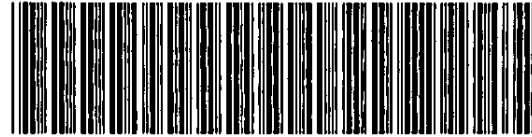
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE FLORIDA

APR 23 2013
D. BRUCE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CAPITAL GROUP INVESTORS II, 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:

OSCAR A GARCIA

Name of Person

Firm/Company

255 UNIVERSITY DRIVE

Address

CORAL GABLES, FL 33134

City/State and Zip Code

YMIRANDA@ACGGDEVELOPMENT.COM

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

For further information concerning this matter, please call:

OSCAR A GARCIA

Name of Person

at **(305) 665-1250**

Area Code & Daytime Telephone Number

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

CAPITAL GROUP INVESTORS II,LLC

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

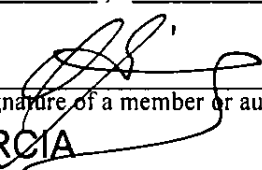
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO	CHARLES E BAKER	8826 E. FAIRWAY BLVD.SUN LAKES,AZ 85248	☐ Add
			☒ Remove
			☐ Add
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CLERK OF DISTRICT COURT
TALLAHASSEE FLORIDA

2011 APR 22 PM 2:00
FILED

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

Dated APRIL 16, 2013.



Signature of a member or authorized representative of a member

OSCAR A GARCIA

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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2013 APR 22 PM 2:00
CLERK OF CIRCUIT
JALAHASSEE FLORIDA