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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Email	Address:	<u> </u>	 	 	 
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ASSURANCE INTERNATIONAL INVESTMENTS, LLC

OHETARY OF STATE LAHASSEE, FLORIDA

Certificate of Status	0
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Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

T. HELD JAN 2 8 2014

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ASSURANCE INTERNATIONAL INVEST		n our records.)	· · · · · · · · · · · · · · · · · · ·
(Name of the Limited Liability Compan (A Florida Limited Li	ability Company)	ANT TORKING	TAL SE
The Articles of Organization for this Limited Liability Company	_ and Essigned		
Florida document number L13000061415	N 28 ETARY HASSE		
This amendment is submitted to amend the following:	E.F.C		
A. If amending name, enter the new name of the limited liable	Ulty company here:		7:32 STATE LORIDA
The new name must be distinguishable and end with the words "Limit" "L.L.C."	ted Liability Company	"," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	2600 S. DOU	GLAS RD, STE	510
(Principal office address MUST BE A STREET ADDRESS)	CORAL GABL	ES, FL 33134	
Enter new mailing address, if applicable:	2600 S. DOU	GLAS RD, STE	510
(Mailing address MAY BE A POST OFFICE BOX)	CORAL GAB	ES, FL 33134	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address has	Mice address on o	ur records, <u>enter</u>	the name of the ne
Name of New Registered Agent	<u> </u>		
New Registered Office Address:	En!	dress	
		, Florida	
	City		Zip Code
New Registered Agent's Stynature, If changing Registered Agent	tı		

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 affice 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:

MGR = Man MGRM = M	ager anaging Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			Add
			Remove
			14 JAN SECRE
			(A) (A) (VIIII
	*		THE SPECIAL PROPERTY.
			FLORIOA
			Add
			Remove
		- ,	- Anna Carlos Ca
	· .•		Død
			Remove
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	•		
	_		
	<u>-</u>		
Dated January 14 2014	<del></del>		
Signature of a member or authorized representative of a member			
Verna De Nelson; Jaqueline Alexander  Typed or printed name of signes		,	
Page 3 of 3	TA <sub>S</sub>		
Filing Fee: \$25.00	SECRI	14 J!	carte.
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