

L130001746973

Florida Department of State
Division of Corporations
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((H130001746973))



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Fax Number : (850) 617-6383

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
POSITIVE INVESTMENT TREND, LLC**

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August 7, 2013

FLORIDA DEPARTMENT OF STATE

Division of Corporations

POSITIVE INVESTMENT TREND, LLC
1111 SW FIRST AVENUE, SUITE 1521
MIAMI, FL 33130

SUBJECT: POSITIVE INVESTMENT TREND, LLC
REF: L13000091444

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please attach a page listed the MGRM and MGR to be added.

Please return your document, along with a copy of this letter, within 5 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

FAX Aud. #: H13000174697
Letter Number: 713A00018882

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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P.O BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

POSITIVE INVESTMENT TREND, LLC

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

The Articles of Organization for this Limited Liability Company were filed on June 25, 2013 and assigned
Florida document number L13000091444

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

B. If amending the registered agent and/or registered office address on our records, enter the name of the
registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

Zip Code

New Registered Agent's Signature, if changing Registered 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.

If 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

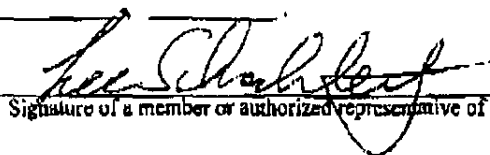
Title	Name	Address	Type of Action
MGRM	Ricardo F. Trejo	1111 SW First Avenue, #1521 Miami, FL 33130	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Positive Investment Trend <i>Limited, a British Virgin Islands Corporation</i>	1111 SW First Avenue, #1521 Miami, FL 33130	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Ricardo F. Trejo <i>PRESIDENT OF POSITIVE INVESTMENT TREND LIMITED</i>	1111 SW First Avenue, #1521 Miami, FL 33130	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated


Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 3 of 3

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