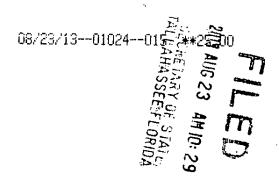
L13000104145

(Re	questor's Name)	
(Ad	dress)	
	dress)	
(Au	uiess)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		Í

Office Use Only



200250976822



AUG 2 6 2013

D. BRUCE

COVER LETTER

Division of Corporations
SUBJECT: CRIMSON INVESTMENTS, 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:
Rama of Person
CRIMSON INVESTABLES, LLC Firm/Company
PO BOX 372795
SATELLITE BEACH FL 32937-2295 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Receptor Ranwafft 31, 622 5535
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount: D\$25.00 Filing Fee \$\Bigcup\$\$\$\$ \$\Bigcup\$
Certificate of Status Certified Copy (additional copy is enclosed) 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 OF

CRIMSON IN	IVESTMENTS I		
(<u>Name of the Limited Liabi</u> (A Florid	lity Company as it now appears on la Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Florida document number 4130001041	_	LY 35, 2013 and assigned	
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the li	imited liability company here:		
The new name must be distinguishable and end with the value. L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET AD)		the designation "LLC" or the abbreviation	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 37229 Satellite Beach,		<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office a		records, enter the name of the new	7
Name of New Registered Agent:			
New Registered Office Address:	Enter I	Florida street address	
		. Florida	
-	City	Zip Code	

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.

New Registered Agent's Signature, if changing Registered Agent:

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member Title **Type of Action Name** <u>Address</u> Richard Ramnath 127 Lansing Island Drive mgrm Indian Harbour Beach FL 32937 Remove

·	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
• `	
	
Dated July	24 2013
-	Signature of a member or authorized representative of a member
	RICHARD RAMNATH
_	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

