U17000120956

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COVER LETTER

то:	Registration Se Division of Cor			
SHRJI	FCT: India:	n Rocks Investors,	L.L.C	
5000	<u> </u>	Name of Lin	nited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Donna Damonte		
			Name of Person	
		Jonathan_James	Damonte, Chartered	
			Firm/Company	
		12110 Seminole	Blvd	
			Address	<u> </u>
		Largo, FL 337	78	
			City/State and Zip Code	
		ddamonte@damo		
		E-mail address: (to be used for future annual report not	ification)
For fur	ther information c	oncerning this matter, please c	all:	
Do	nna Damonte		nt 727 \ \586-2889	
Name of Person			at (727) Area Code Daytin	ne Telephone Number
Enclos	ed is a check for th	ne following amount:		
₫\$ 2.	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
				1
MAILING ADDRESS: Registration Section			STREET/COUR Registration Section	
	Divisio	n of Corporations	Division of Corpo	
		ox 6327 issee, FL 32314	Clifton Building 2661 Executive Co	enter Circle
			Tallahassee, FL 33	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20/10CT 25 PM 2:42

Indian Rocks Investors, 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 Co	empany were filed on	August 2	7, 2013	and assigned
Florida document number <u>L13000120956</u>	_,			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability company	here:		
The new name must be distinguishable and contain the words "Limit	ed Liability Company," in	e designation "	LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRI	ESS)			· · · · · · · · · · · · · · · · · · ·
				
Enter new mailing address, if applicable:	_			
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registe	ered office address	on our rec	ords, <u>enter th</u>	e name of the new
registered agent and/or the new registered office addre	ess here:			
Name of New Registered Agent:				
New Registered Office Address:	Futor k	lorida street aa	Ulrace	
	City		. Florida	Źıp Code
New Registered Agent's Signature, if changing Registered	Agent:			1
I hereby accept the appointment as registered agent as provisions of all statutes relative to the proper and confidence the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	nd agree to act in the mplete performance ent as provided for in	of my duties i Chapter 60	s, and I am fam 05, F.S. Or, if t	iliar with and his document is
	If Changing Registered	Agent, <u>Signat</u>	ure of New Regist	ered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	William G. Damonte	12110 Seminole Blvd.	 € Add
		Largo, FL 33778	
			□ Remove
MGR	Donna Damonte	12110 Seminole Blvd.	*E F Add
		Largo, FL 33778	
			□ Remove
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<u>ite:</u> If t	he date inserted i	in this block de	oes not me	et the appli	cable statute	ory filing req	uirements, th	is date will	not be listed a
cument	's effective date	on the Departi	nent of Sta	ate's records	i.				
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)th day after t			ite, out in	or all elle	ctive time,	, at 12.01	a.iii. Oii t	ne earner c
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d	October 	8		2017	<u> </u>				
nea									

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Typed or printed name of signee

Filing Fee: \$25.00