<u>L14000072758</u>

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SECRETARY OF STATE
ALLAHASSET FIREIT

COVER LETTER

TO: Registration Sec Division of Corp			•	
SUBJECT: 1407	Investments, I	LLC		
SUBJECT:		ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.		
Please return all correspon	ndence concerning this matter t	to the following:		
	Joseph M. B	alocco, Jr.		
		Name of Person		
	Joseph M. B	alocco Jr., P.A.		
		Firm/Company		
1323 SE 3rd Avenue				
		Address		
	Fort Lauderdale, FL 33316			
	City/State and Zip Code			
		outhcrossdev.com		
For further information of	E-mail address: (i	to be used for future annual report notificall;	cation)	
Joseph M. I	Balocco, Jr.	at (954) 764-00	005	
Name of		Area Code Daytime	Telephone Number	
Enclosed is a check for th	e 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)	
MANJ	ING ADDRESS:	STREET/COURIE	CR ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1407 Investments, LLC		
(<u>Name of the Limited Liab</u> (A Flor	illity Company as it now appears on our records.) ida Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on February 25, 2014	and assigned
Florida document number L14000032758	·	
This amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the words "	Limited Liability Company," the designation "LLC" or the a	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable:	4.44	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		the name of the n
	į	S Z
Name of New Registered Agent:		
New Registered Office Address:		The second
	Enter Florida street address	%
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registe	red Agent:	20 20
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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 605, 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

If amending the Managers or Author Member on our records, enter the title, in e, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Cristina Addison	941 NE 19th Avenue	🗆 Add
	·	Fort Lauderdale, FL 333	04 Remove
MGR	AYC Investments, LLC	941 NE 19th Avenue	Add
		Fort Lauderdale, FL 3330)4 □ Remove
			Add
			□ Remove
		·	D Add
			Remove OCT -9
			AR (T)
	ALAMANA OR		□ Add
			☐ Remove

D.	If amending any other information	nter change(s) here: (Attach additi	onal she if necessary.)
		· · · · · · · · · · · · · · · · · · ·	,
E.	the date this document is filed by the Florida	prior to date of receipt or filed date and cannot	(optional) be more than 90 days after
	Dated March 10	2014	
	a. Mellen	Hodole	
	Cristina Addisor		e of a member
		Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

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