14000047479

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Registration Section

Tallahassee, FL 32314

TO:

Division of Co	•		
SUBJECT:	Clear Inv	vestments LLC	
	Name of Lim	ited Liability Company	-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
The enclosed Afficies of	Amendment and rec(s) are sub	minica for filling.	
Please return all correspo	ondence concerning this matter	to the following:	
		Anton Werner	
		Name of Person	
		Clear Investments LLC	
		Firm/Company	
		1364 Washington Av.	
		Address	
		Miami Beach, FL 33139	
		City/State and Zip Code	
	F-mail address (taciwerner@gmail.com to be used for future annual report	notification)
For further information o	concerning this matter, please co		nomicalion)
	, , , , , , , , , , , , , , , , , , ,		
	Werner	at (_305)	302-3435
Name o	of Person	Area Code Da	ytime Telephone Number
Enclosed is a check for t	he 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)
MAILING ADDRESS:		STREET/CO Registration S	URIER ADDRESS:
Registration Section Division of Corporations P.O. Box 6327		Division of Co Clifton Buildi	orporations

2661 Executive Center Circle Tallahassee, FL 32301

TO ARTICLES OF ORGANIZATION OF

Clea	ar Investments LLC
(Name of the Limited Liability (A Florida L	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Cor Florida document numberL14000047479	mpany were filed on March 21, 2104 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ed liability company here:
Clear Investment	Holdings LLC
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1364 Washington Av.
(Principal office address MUST BE A STREET ADDRE	Miami Beach, FL 33139
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1364 Washington Av
B. If amending the registered agent and/or registe registered agent and/or the new registered office addre	red office address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
- 100 - 100	City Zin 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 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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			□ Change
			□ Add
			□ Remove
			☐ Change
			17 Add
			Remove
			Remove Grange
			Add
			□ Remove
			□ Change
			Add
			□ Remove
			☐ Change
			Add
		 	☐ Remove
			☐ Change

,	
	<u></u>
(If an ei Note:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	/t//W
	Signature of a member or authorized representative of a member
	Anton Werner
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00