L14 000066527

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Division of C	Section Corporations	The state of the s	.			
	nvestment Group, LLC	•				
Name of Limited Liability Company						
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.				
Please return all corre	spondence concerning this matter	to the following:				
	Christian Marin					
		Name of Person				
	M&L Investment Gro	oup, LLC				
		Firm/Company				
	409 Sun Lake Cir. A	pt. 113				
		Address				
	Lake Mary, FL 3274	6				
		City/State and Zip Code				
	mlinvestgroup@gma					
	E-mail address: (to be used for future annual report notifi-	cation)			
For further informatio	n concerning this matter, please c	all:				
Christian Marin		407 221-2981				
Nam	ne of Person	Area Code Daytime	Telephone Number			
Enclosed is a check for	or the 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:

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

wat investment Group, LLC	····	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v. Florida document number <u>L14000068527</u>	vere filed on 04/28/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	(Name of the Limited Liability Company as it now appears on our records.) (A Florada Limited Liability Company) on for this Limited Liability Company were filed on 04/28/2014	
The new name must be distinguishable and end with the words "Limited Liabil	ity Company," the designation "LLC" or the a	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 here:	ice address on our records, enter	the name of the new
Name of New Registered Agent:	-	TS T
New Registered Office Address:		
	,	12
		Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr	e to act in this capacity. I further ago erformance of my duties, and I am f	ree to comply with the amiliar with and

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Authorized Member on our records, enter the title, name, 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
AMBR	Luz Osorio	590 Whittingham Place	Add
		Lake Mary, FL 32746	■ Remove
			U Aud
			□ Remove
			□ Add
			□ Remove
			Remove A DEC 3
			SET OF ANY
			Refhove
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			☐ Remove

D.	If amending any othe	r information, enter ch	ange(s) here:	(Attach additiona	l sheets, if necessary.)
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T.	Terative data is all a	. 4b 4b - J-4£ 618			(4 · 1)
	(The effective date must be s	r than the date of filing: pecific, cannot be prior to date led by the Florida Department	of receipt or filed		optional) nore than 90 days after
	Dated December 28	,	2014		
		Christa	Ma	~	
	<u> </u>	Signature of a m	ember or authoriz	ed representative of	ı member
			Christian M	larin	
		· · · · · · · · · · · · · · · · · · ·	Typed or printed r	name of signee	

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Filing Fee: \$25.00

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