

Division of Corporations

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : ARNOLD MATHENY & EAGAN, P.A.  
Account Number : I20000000141  
Phone : (407) 841-1550  
Fax Number : (407) 841-8746

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address:

Labrams@ameo.l.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
CLEARROCK INVESTMENT LLC**

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

14 JUL 14 AM 10:11

14 JUL 14

Electronic Filing Menu

Corporate Filing Menu

Help JUL 14 2014

C. CARROTHERS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ClearRock Investment 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:

Lehn E. Abrams

Name of Person

Arnold, Matheny & Eagan, P.A.

Firm/Company

605 E. Robinson Street, Suite 730

Address

Orlando, FL 32801

City/State and Zip Code

labrams@ameorl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lehn E. Abrams

Name of Person

at (407) 841-1550

Area Code

Daytime Telephone Number

Enclosed is a check for 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**

FILED  
14 JUL 14 AM 10:11

SEC. 114.01, STATE  
TALLAHASSEE, FLORIDA

**CLEARROCK INVESTMENT 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 Company were filed on July 8, 2014 and assigned Florida document number L14000107823.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the 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 on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_  
City Zip 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

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Nikhil Desai	505 Riverfront Parkway	<input type="checkbox"/> Add
		Chattanooga, TN 37402	<input checked="" type="checkbox"/> Remove
AMBR	Hiren Desai	505 Riverfront Parkway	<input checked="" type="checkbox"/> Add
		Chattanooga, TN 37402	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated: July 10, 2014



Signature of a member or authorized representative of a member

Lehn E. Abrams

Typed or printed name of signee