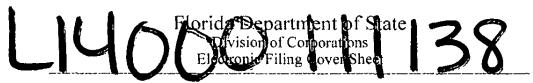
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000190829 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number: I20010000062

: (323)962-8600

Fax Number

: (323)962-3889

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TOUCH BLUE INVESTMENTS BURLINGTON LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

NO 1 4 2014 J. HARRIS

Electronic Filing Menu Corporate Filing Menu

Help

TO:

**Registration Section** 

## **COVER LETTER**

Div	ision of Cor	porations		
SUBJECT:	Touch Blu	e Investments Burlington L	LC	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		100 W. Broadway Suite	100	
			Address	<del></del>
		Glendale, CA 91210		
City/State and Zip Code				
		rainpudi@gmail.com E-mail address: (	to be used for future annual report not	ification)
For further in	nformation c	oncerning this matter, please co	all:	
lmelda Vas	squez		323 962-8600 e	
	Name o	f Person	at ()	ne Telephone Number
Enclosed is a	a check for th	ne following amount:		
□ \$25.00 F	Filing Pee	☐ \$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)
	Registr	ING ADDRESS:	STREET/COUR Registration Section	on

P.O. Box 6327

Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Touch Blue Investments Burlington LLC				
( <u>Name of the Limited Liability Con</u> (A Florids Limit	npany as it now appears on our led Liability Company)	records.)		
The Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for the Organizatio	any were filed on 07/15/201	4a	nd assig	ned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited li	iability company here:			
The new name must be distinguishable and end with the words "Limited I	Liability Company," the designati	on "1.1.C" or the abbrevia	ation "L.L	C."
Enter new principal offices address, if applicable:				<del></del>
(Principal office address MUST BE A STREET ADDRESS,	<u> </u>		7	3,5
			2	SIO ECC
	<del> </del>		G	흑ુ
Enter new mailing address, if applicable:			ယ	골론
(Mailing address MAY BE A POST OFFICE BOX)			753	- 福田 14.
				1212
		<u> </u>	۰٫۲۱	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address between the registered office address between the registered of the registered of the registered of the registered agent and/or the new registered of the registered agent and/or the new registered agent and/or the new registered agent and/or the new registered of the registered agent and/or the new registered agent and/or the new registered agent and/or the new registered of the registered agent and/or the new registered agent		ecords, <u>enter the n</u>	name of	the new
Name of New Registered Agent:		<del></del>		
New Registered Office Address:				
	Enter Florida stree	t 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 hability 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>	Address	Type of Action
AMBR	JAY VADREVU	18312 BANKSTON PLACE	
		TAMPA, FL 33647	✓ Remove
AMBR	MURALI KATIPALLI	18312 BANKSTON PLACE	□ Add
		TAMPA, FL 33647	<b>✓</b> Remove
AMBR	AMAR YALAVARTHY	18312 BANKSTON PLACE	Add
		TAMPA, FL 33647	<b>☑</b> Remove
			O Remove GRAD
		·	□ Remove ₹
			□ Add
			☐ Remove

f amending any other information,	enter change(s) here: (Attach additional sheets, if necessary)
<del></del>	
- <u> </u>	
Effective date, if other than the date (The effective date must be specific, cannot be a the date this document is filed by the Florida E	prior to date of receipt or filed date and cannot be more than 90 days after
Dated August 13	2014
a	Rankua.
Signa	ature of a member or authorized representative of a member
	Ravi Ainpudi
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00