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.

(((H17000279148 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 : (950)617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0539 : (305)392-9591 Fax Number

**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 SEVEN PM INVESTMENTS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

O SIMMONS

OCT 2 : 2017

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPIEN PM FIVESTMENTS, LLC Name of the Limited Limbility Company as it now appeare on our response. (A Florida Limited Limbility Company)
(A Florida Limited Limited Limited Company)
The Articles of Organization for this Limited Liability Company were filed on 1/22/2014 and assigned
Florida document number 14000115739
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
the state of the s
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Ca Ca
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
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

If Changing Registered Agent, Signature of New Registered Agent

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.

MGR = AMBR =	Manager Authorized Member			i
<u>Title</u>	<u>Name</u>		Address	Type of Action
MOR	Thevelyn	MORA	9420 SW 66 ST Miami, FZ - 33173	DAdd
	<i>r</i>		Miami, FZ. 33173	Remove
				Ci Change
				Remove
				Change
				D Add
				□ Remove
			<u></u>	Thomso T
				Add 23
				Romeve 2
				Change
				☐ Remove
				☐ Change
				□ Add
				☐ Remove
				□ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

). If amending any other information, enter change(s) here: (Anach additional sheets, if necessary.)	:
	
	1
Dr. MSHDI	1700 -5
	123
	-
	8: 26
3. Effective date, if other than the date of filing: (if an effective date is tisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	to 605,0207 (3)(b) to listed as the
f the record specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the 6 b). The 90th day after the record is filed.	earlier of:
Duted OCT , OC OC OC OC OC OC OC OC	
Signature of a member or authorized representative of a member	-
OLG A MORA. Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00