# 14000122641

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DEC = 5 2014

T. BROWN

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: SOLO INVESTMENT HOLDING 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:

# JASMINE RODRIGUEZ Name of Person BEST QUICK TAX RETURNS Firm/Company 320 S BUMBY AVE STE 10 Address ORLANDO FL 32803 City/State and Zip Code

For further information concerning this matter, please call:

JASMINE RODRIGUEZ

\_,407\896-792*1* 

Name of Person

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

### SOLO INVESTMENT HOLDING LLC

ALLAND CONTRACTOR OF THE STATE (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 08/05/2014	and assigned
Florida document number L14000122641		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Limited Liab	bility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Co933 Narcoossoc	Rd Unit 605
(Principal office address MUST BE A STREET ADDRESS)	Orlando FL 3288	<u> </u>
Enter new mailing address, if applicable:	(1923 NACCOSSA	e Rd Unit 605
(Mailing address MAY BE A POST OFFICE BOX)		320
		· ·
B. If amending the registered agent and/or registered o		ter the name of the new
registered agent and/or the new registered office address her	<u>'e:</u>	
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 **Title** Name 1 <u>Address</u> Type of Action SALEH B MERHI MGR 12000 FOUNTAINBROOK BLVD ORLANDO FL 32825 **■** Remove 10465 STAPELY DR MGR SALEH BARAKAT MERHI **■** Add ORLANDO FL 32832 □ Remove ☐ Add □ Remove \_□ Remove □ Add ☐ Remove ☐ Add □ Remove

D. I	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	ffective date, if other than the date of filing:
г	NOVEMBER 13TH 2014
L	$\frac{1}{\lambda}$
	Signature of a member or authorized representative of a member
	SALEH BARAKAT MERHI
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00