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т о :	Registration Se Division of Cor		· •				
SUBJE	7 /7 / M	NVESTMENT PROPERTIES	, LLC.				
		Name of Limi	ited Liability Company				
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please	return all correspon	ndence concerning this matter	to the following:				
		FERNANDO SANCHEZ					
	Name of Person						
		CAPITAL INVESTMENT	PROPERTIES, LLC.				
			Firm/Company				
		7215 MONETARY DRIVI	E#105				
			Address				
		ORLANDO, FL. 32809					
			City/State and Zip Code				
		FSANCHEZ111@YAHOO					
		E-mail address: (to be used for future annual report notifi	cation)			
For fur	ther information co	oncerning this matter, please ca	all:				
FERN	ANDO SANCHEZ	2	407 832-4243 at ()				
	Name of	f Person	Area Code Daytime	Telephone Number			
Enclose	ed is a check for th	ne following amount:					
\$2:	5.00 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

CAPITAL INVESTMENT PROPERTIES, 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 $\frac{11}{20}$ and assigned Florida document number L14000179938 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 contain 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

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 Revistered Agent

Page 1 of 3

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	FERNANDO SANCHEZ	7215 MONETARY DRIVE #105	■ Add
		ORLANDO, FL32809	□ Remove
			□ Change
MGR	TONY SANCHEZ	7215 MONETARY DRIVE #105	Add
		ORLANDO, FL 32809	□ Remove
			D Change
	- 12		Add
		· .	☐ Remove
			Change
			
		·	□ Remove
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			ALLAHASSEE, FOR
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ffective date, if other than the an effective date is listed, the date mus	date of filing:t be specific and cannot be prior t	to date of filing or more than	(optional) 190 days after filing.) Purs	suant to 605.02
lote: If the date inserted in this blocument's effective date on the De	ock does not meet the applica	ble statutory filing requi	irements, this date will	not be listed a
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e record specifies a delayed		an effective time,	at 12:01 a.m. on t	he earlier
	ord is filed.	\sim	:	
		~ /\		
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