

L 15000203935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100292315101

11/29/16--01014--011 **25.00

FILED
2016 NOV 29 PM 5:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
DEC - 1 2016

HOUSTON LAW FIRM
1401 East Broward Blvd
Suite 201
Ft. Lauderdale, Fla. 33301

BART A. HOUSTON
DIRECT: 954.900.2615
EMAIL: bhouston@thglaw.com

November 28, 2016

By Federal Express #777802630910

Florida Department of State
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

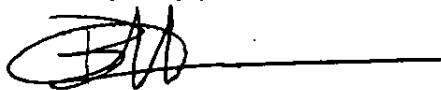
Re: SLS 3206 Invest, LLC

Enclosed please find our check #512 in the amount of \$25.00 for the amendment fee to make the name change.

Also enclosed is the form to Amend the Articles of Organization to change the company name from SLS 3206 Invest, LLC to 3206.Invest, LLC..

Please issue the acknowledgement letter stating that the enclosed changes have been made.

Very truly yours,

A handwritten signature in black ink, appearing to be 'B.A.H.', is written over a horizontal line.

Bart A. Houston

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SLS 3206 Invest, 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:

Bart A. Houston
Name of Person
Houston Law Firm
Firm/Company
1401 E. Broward Blvd., Suite 201
Address
Fort Lauderdale, FL 33301
City/State and Zip Code
bhouston@thlglaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bart Houston at 954 900-2615
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**

FILED
2016 NOV 29 PM 5:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SLS 3206 Invest, 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 12/7/2015 and assigned Florida document number L15000203935.

This amendment is submitted to amend the following:

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

3206 Invest, LLC

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

FILED

2016 NOV 29 PM 5:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

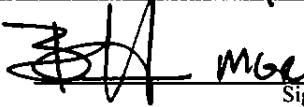
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<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.)

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 November 22, 2016



Signature of a member or authorized representative of a member

Bart A. Houston, MGR

Typed or printed name of signee

2016 NOV 29 PM 5:28
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA