46000001773

(Requestor's Name)
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(Business Entity Name)
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TO:	Registration Se Division of Cor		•	,
SUBJE		EL INVESTMENTS LLC		
SUDJE	C1:	Name of Lim	nited Liability Company pomitted for filing. to the following: Name of Person In Justine Theories ALC Firm/Company Dest Sample Rd 114 Address 33065 City/State and Zip Code To be used for future annual report notification) all: 1754 281-2300 Area Code Daytime Telephone Number	
		Amendment and fee(s) are sub	•	
Please	eturn all correspo	ndence concerning this matter	to the following:	
		MIKE MKAM		
			Name of Person	
		Galiharel	Investments LLC	~
		(0211 L	Jest Sample Rd # 114	
		CORAL SPRINGS, FL	33065 ·	
		MKAM1318@AOL.COM	City/State and Zip Code	
		=	to be used for future annual report notification)	
For furt	her information co	oncerning this matter, please ca	all:	, , , , , ,
MIKE	MKAM			SECTION 1
	Name of	Person		第27
Enclose	d is a check for th	e following amount:		四月 星 口
\$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Certified Copy Certificate (additional copy is enclosed) Certified Conditional copy is enclosed)	of Status &

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

UALITAREL INVESTIMENTS LLC	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L16000001773	y were filed on JANUARY 4, 2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	10211 West Sample Rd # 114 CORAL SPRINGS, FL 330165
(Principal office address MUST BE A STREET ADDRESS)	COUNT 31 MILES, 12 22 06 23 .
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	10211 West Sample Rd #1 CORAL SPRINGS, FL 33065. office address on our records, enter the name of the new re:
	<u>-</u>
Name of New Registered Agent: MIKE MKAM	<u>, , , , , , , , , , , , , , , , , , , </u>
New Registered Office Address: 10211	West Sample Rd # 174 3 1
CORAL SPRI	NGS , Florida 33965 7 m
New Registered Agent's Signature, if changing Registered Agent	City Zip.Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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 = M $AMBR = A$	lanager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	MIKE MKAM	11049 NW46th Drive	Add
		CORAL SPRINGS, FL 33076	Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			🗖 Change
	·		🗀 Add
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n effective date te: If the date	is listed, the date mu inserted in this b	st be specific and callock does not me	annot be prior to	date of filing or the	nore than 90 da	ys after filing.) Pursuant to 605; will not be liste
cument's effect	tive date on the D	epartment of Sta	te's records.		-6 14dan		0=
	cifies a delayed by after the rec		te, but not a	an effective	time, at 12	:01 a.m.	on the earlie
ted3\	22/17	<i>1</i>		. •			
	Mhi	for.					
		Signature of a me		ed representativ	- c t.		

Page 3 of 3

Filing Fee: \$25.00