

L160000008232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

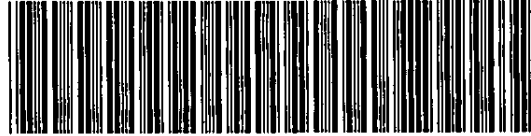
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 15 2016

S MASON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Choice one Investments 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:

Luis Lopez

Name of Person

Choice One Investments LLC

Firm/Company

10503 San Jose Blvd #10

Address

Jacksonville, FL 32257

City/State and Zip Code

lchoiceoneinc@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis Lopez

904 738-7729
at ()

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**

Choice One Investments 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 01/12/2016

Florida document number L16000008232

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)

10503 San Jose Blvd #10

Jacksonville, FL 32257

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9926 Beach Blvd #112

Jacksonville, FL 32246

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:

Luis Lopez

New Registered Office Address:

10503 San Jose Blvd #10

Enter Florida street address

Jacksonville

Florida 32257

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 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> | <u>Type of Action</u> |
|--------------|-----------------|-------------------------------|--|
| MGR | Jose Gutierrez | 1379 Dillwortown xing #341 | <input checked="" type="checkbox"/> Add |
| | | West Chester, PA 19382 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Melissa Morales | 12080 SW 127th Ave #217 | <input checked="" type="checkbox"/> Add |
| | | Miami, FL 33186 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Dim Villarson | 1728 NE Miami Gardens Dr #104 | <input type="checkbox"/> Add |
| | | Miami, FL 33179 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | Julio Sanchez | 3320 Robinhood Rd #149 | <input checked="" type="checkbox"/> Add |
| | | Winston Salem, NC 27106 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | Jennifer Diaz | 815 N La Brea Ave #471 | <input checked="" type="checkbox"/> Add |
| | | Inglewood, CA 90302 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | Jennifer Diaz | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |

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This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slightly textured appearance and some minor blemishes or discoloration, particularly near the top edge. The overall tone is off-white or light cream.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

FILED

2016 MAR 14 AM 11:00

SECRETARY OF STATE
CLARK COUNTY, FLORIDA

2016

Signature of a member or authorized representative of a member

Typed or printed name of signee

Jose Gutierrez

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA