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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: LFD Investment 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:
Jean L Malary Name of Person
LFD Investments LLC.
1500 Lauderdale VIIIa DR.
Ft. Lauderdale, FL 33311 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jean L Malary at (954) 309-7593 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount: \$\Begin{array}{c} \\$25.00 \text{ Filing Fee} \& \Begin{array}{c} \\$30.00 \text{ Filing Fee} \& \Begin{array}{c} \\$55.00 \text{ Filing Fee} \& \Begin{array}{c} \\$60.00 \text{ Filing Fee}, \\ \Certificate \text{ Of Status} \& \Certified \text{ Copy} \\ \text{ (additional copy is enclosed)} \end{array} \$\Begin{array}{c} \\$60.00 \text{ Filing Fee}, \\ \Certified \text{ Copy} \\ \text{ (additional copy is enclosed)} \end{array} \$\Begin{array}{c} \\$60.00 \text{ Filing Fee}, \\ \Certified \text{ Copy} \\ \text{ (additional copy is enclosed)} \end{array}
(additional copy is enclosed) (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

L-D Investments LLC	on our records)
(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Company were filed on	Z 1 Z016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company her	<u>re</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," the de	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Bio
(Principal office address MUST BE A STREET ADDRESS)	E U CD
	502 1 (m)
Enter new mailing address, if applicable:	Fig
(Mailing address MAY BE A POST OFFICE BOX)	
	22 PM 22
	75
B. If amending the registered agent and/or registered office address on registered agent and/or the new registered office address here:	our records, enter the name of the ne
Name of New Registered Agent:	
New Registered Office Address:	
Enter Flor	ida 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = .Ma $AMBR = Au$	nnager thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Malary Jean L	1500 Lauderdale Villa D	ℓ. □ Add
		Ff. Lauderdale, FL 33311	□ Remove
			Change
MGR	Petit-Frere, Facilia	1500 Landordale Villa D	e. Zadd
		1500 Landordale Villa D FA, Landordale, FL 33311	Remove
			Change
			Add
			☐ Remove
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Filing Fee: \$25.00