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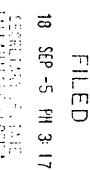
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COVER LETTER

TO:

	Registration So Division of Cor			
ero ma		TONES INVESTMENT GRO	OUP LLC	
SUBJEC	. E:	Name of Lim	ited Liability Company	
The enck	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspo	ondence concerning this matter	to the following:	
		LUKE JOSEPH		
		SILVER STONES INVE	Name of Person STMENT GROUP LLC	
		2901 W CYPRESS CRE	Firm/Company EEK ROAD SUITE 111	
			Address	
		FORT LAUDERDALE F		
		CORPORATE@ABNSITI		
For furthe	er information c	E-mail address: (oncerning this matter, please ca	to be used for future annual report noti all:	fication)
LUKE JO	OSEPH		954 479 -6141	
	Name o	t Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	0) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio	ING ADDRESS: ation Section in of Corporations ox 6327	★ STREET/COURI Registration Section Division of Corporation Clifton Building	n

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SILVER STONES INVESTMENT	GROUP LLC		
(Name of the Limited	Liability Compa \ Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Lia Florida document number L16000058616	bility Company	were filed on 03/23/2016	and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liab	oility company here:	
N/A			
The new name must be distinguishable and contain the wo	rds "Limited Liabi	fity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		N/A	18
(Principal office address MUST BE A STREET ADDRESS)			S 7
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE E</u>	<u>30X)</u>	N/A	-5 LED
B. If amending the registered agent and/or the new registered off	or registered o ice address he	office address on our records. re:	enter the name of the ne
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A	Enter Florida street address	
		EL.	rida
		City , F10	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

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>	Address	Type of Action
AMBR	LUCIA ALCIRA	P O BOX 881371 PORT SAINT LUCIE FL 34988	
			□ Remove
			Change
			Add
			Remove
			SEP Change
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		Remeve	
			Change
			□ Remove
			☐ Change
		☐ Remove	
			Change
			Add
			Remove
			Change

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FILING DATE	
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	
he record specifies a delayed effective date, but not an effective time, at The 90th day after the record is filed.	12:01 a.m. on the earlier of:
Dated	
Direct	
Signature of a member or authorized representative of a memb	NA.
Lulke TOSEPH Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00