

9/27/2016

From Account Bookkeeping 1.321.888.4914 Tue Sep 27 14:00:51 2016 MDT Page 1 of 5

Division of Corporations

**L160002404763**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000240476 3)))



H160002404763ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : ACCOUNT BOOKKEEPING CORP  
Account Number : I20120000055  
Phone : (407)898-1757  
Fax Number : (407)897-5336

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
THREEDC INVESTMENTS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

FILED  
16 SEP 27 AM 9:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H16 000240476 3

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: THREBDC 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:

MARIANA SOUZA

Name of Person

ACCOUNT BOOKKEEPING CORP

Firm/Company

3300 S HIAWASSEE RD STE 106

Address

ORLANDO, FL 32835

City/State and Zip Code

CUSTOMER@ABKCORP.COM

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

For further information concerning this matter, please call:

MARIANA SOUZA

Name of Person

407

Area Code

898-1757

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

FILED  
16 SEP 27 AM 9:33  
TALLAHASSEE, FL  
SECRETARY OF STATE

H160002404+6 3

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

THREEDC 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 05/23/2016 and assigned  
Florida document number L16000099815

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:

3224 WISH AVENUE

(Principal office address MUST BE A STREET ADDRESS)

KISSIMMEE, FL 34747

Enter new mailing address, if applicable:

1108 CROTON PLACE

(Mailing address MAY BE A POST OFFICE BOX)

CELEBRATION, FL 34747

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:

DONIZETE ARGENTIN

New Registered Office Address:

3224 WISH AVENUE

Enter Florida street address

KISSIMMEE

Florida

City

34747

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

7160002404+6 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Argentin, Donizete	RUA BENEDITO COLLA 21	<input type="checkbox"/> Add
		AMERICANA, SP 13474-223 BR	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Argentin, Maria Cecilia P.	RUA BENEDITO COLLA 21	<input type="checkbox"/> Add
		AMERICANA, SP 13474-223 BR	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
SEP 27 16  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE  
AM 9:33

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

38

39

40

41

42

43

44

45

46

47

48

49

50

51

52

53

54

55

56

57

58

59

60

61

62

63

64

65

66

67

68

69

70

71

72

73

74

75

76

77

78

79

80

81

82

83

84

85

86

87

88

89

90

91

92

93

94

95

96

97

98

99

100

(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)

2016

Typed or printed name of signee

FILED  
16 SEP 27 AM 9:32  
CLERK OF STATE  
TALLAHASSEE, FLORIDA