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(Re	equestor's Name)	
(Ac	ddress)	
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☐ PICK-UP	☐ WAIT	MAIL MAIL
(Bı	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:

	Registration Se Division of Cor			
SUBJEC		NVESTMENTS, LLC		
SUBJEC		Name of Lim	ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		Matthew Slaughter		
			Name of Person	
			Tents, LLC Name of Limited Liability Company ent and fee(s) are submitted for filing. Oncerning this matter to the following: Name of Person Firm/Company O Cartica Food Address Address City/State and Zip Code ughter@gmail.com E-mail address: (to be used for future annual report notification) this matter, please call: 1239 17-4848 Area Code Daytime Telephone Number 19.00 Filing Fee & S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) Street Address: Registration Section Division of Corporations	
		400 Carica ro	a d	
			Address	
		Naples FL	34108	
		mjcslaughter@gmail.com	City/State and Zip Code	
			to be used for future annual report noti	ification)
For furthe	er information co	oncerning this matter, please c	all:	
Nicholas	Long		239 417-4848	
	Name of	f Person	Area Code Daytim	ne Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$2 5.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
	Mailing Addres Registration S			ection
	Division of C			
I	P.O. Box 632	7	The Centre of T	Γallahassee
•	Γallahassee, F	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COLSON 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 12/15/2016 ____ and assigned Florida document number ______ 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the pb <u>egiste</u>red agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

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 con v with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar v v and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this do ment is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liabitity company has been notified in writing of this change.

City

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
MGR	Matthew Slaughter	400 Carica Road	■Add
		Naples, FL 34108	□Remove
			□Change
MGR Victor Slaughter	Victor Slaughter	20730 Groveline Court	= Add
		Estero, FL 33928	Remove
			Change
	<u> </u>		□Add
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ffective d	ate. if other (than the date (of filing:				(optional)	
an effective	date is listed, the	e date must be spe in this block do	cific and cannotes not meet t	ot be prior to d	date of filing or e statutory fili	more than 90 da ng requiremen	ys after filing.) I hts, this date w	Pursuant to 605.020 fill not be listed a
ocument's	effective date	on the Departm	ent of State's	s records.	•			
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record spe Lis filed.	cines a delaye	a effective date,	out not an el	necuve ume	., at i∠.∪ I at.m	. on me came	. OI. (O) THE	90th day after th
		2.6	20	77				
Dated	August	23		22 —————				
				\	27/			
-		Signat	ure of a memb	er or authoriz	zed representati	ve of a member		

Filing Fee: \$25.00