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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: ESCALATING INVESMENT 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:
PATRICIA RONDERUS Name of Person
ESCALATING INVESTMENT LLC Firm/Company
7223 PINE VALLEY ST
BRADENTON FL 34202 City/State and Zip Code Pronderos W Vahoo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PATRICIA RONDEROS at 941 5040381 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Scrifficate of Status 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ESCALATING (Name of the Limited (A	INVEST	MENT is it now appears	LLC on our records.)		
The Articles of Organization for this Limited Liab Florida document number <u>L 1800009</u>	oility Company we			g and assign	ned
This amendment is submitted to amend the follow	ving:			20 7A 7A	
A. If amending name, enter the new name of t	he limited liability	company here	2:	Z4 JUN : ECRETA	Ħ
The new name must be distinguishable and contain the wor	ds "Limited Liability (Company," the des	ignation "LLC" or the a	777	(-
Enter new principal offices address, if applicab	ole:			AH D	(======)
(Principal office address MUST BE A STREET	ADDRESS) _			- 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
Enter new mailing address, if applicable:	_				
(Mailing address MAY BE A POST OFFICE BO	<u> </u>				
B. If amending the registered agent and/or regagent and/or the new registered office address	<u>here</u> :				<u>eg</u> istered
Name of New Registered Agent:	PATI	LILIA	LONDERC	77	
New Registered Office Address:	7223		lalley ST	- 	
	Braden	to n	, Florida	34202 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>	Address	Type of Action
MGR	Eduardo Ronderos	4134 Via Piedra Cie F209 Saravotu, FL 34233	Ł XAdd
			□Remove
			Change
			□Add
			□Remove
			□Change
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			□Change

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lfan effecti <u>Note:</u> If t	re date, if other than the date of filing: tive date is listed, the date must be specific and cannot be prior to date of filing or more f the date inserted in this block does not meet the applicable statutory filing nt's effective date on the Department of State's records.	
e record sp rd is filed.	specifies a delayed effective date, but not an effective time, at 12:01 a.m. or d.	n the earlier of: (b) The 90th day after the
	See and and	
Dated	Signature of a member or authorized representative of	M

Typed or printed name of signee