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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Corporations
SUBJECT: Project A New Direction Investment Grp LCC 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:
Elijah Holloway Name of Person
Project A New Direction Investment Gip LCC
1210/ N Nebraska ave Ste C
Tampa FC 33612 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: $465 - 3914$
Eliah Holway at 813 Area Code Daytime Telephone Number A P
Contact the authority for the following amount
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:  Registration Section  Division of Corporations  P.O. Box 6327  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

Project A New Vector Investment Corp CC  (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 8 (L) 2000 and assigned
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)  12101
Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  12101 N. Nebraska Que Ste C
Tompo, FC 33612  If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here:
Name of New Registered Agent: Alph Molbury  New Registered Office Address: 1201 N Nebrasky Aug 5 to C  Enter Plorida street address
TAMPA Florida 33617. 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 amendin	ng Authorized Person(s) authorized land of the desired land of the	zed to manage, enter the title, name, and address of each person being add
. MGR = . N	11	i
Title '	<u>Name</u>	Address Type of Action
ME	ELyph Holburg	Ste C Ave Tampa Il 336/2 DRemove
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EL MIHUIII	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Note: If	e date, if other than the date of filing:
record : d is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated/	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member  Lijah Holloway  Typed or printed name of signee