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#### COVER LETTER

## Division of Corporations INVESTMENT COLUMBUS LLC · :UBJECT: 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: \nthony Gee Name of Person INVESTMENT COLUMBUS LLC Firm/Company 1296 PEREGRINE WAY Address WESTON, FL 33327 City/State and Zip Code bradleygrantgee@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please card. **Bradley Gee** Daytime Telephone Number Name of Person Enclosed is a check for the following amount: **\$25.00** Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Maiting Address:

TO:

**Registration Section** 

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

JNVESTMENT COLUMBUS LLC

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Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Florida document number L22000247364			
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this amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability compa	any here:	
The new name must be distinguishable and contain the words "Lin	nited 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 ADD)	RESS)		
Enter new mailing address if applicable			
Maning dates MAT BE A FOST OF FICE BOST			
B. If amending the registered agent and/or registere agent and/or the new registered office address here:			
Name of New Registered Agent.			
New Registered Office Address:	Ent	er Florida street address	
		Flor	ida
	· in	1101	Zip Code
New Registered Agent's Signature, if changing Registere	ed Agent:		
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and cacept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change.	complete performan igent as provided fo ed office address, I	ice of my duties, and or in Chapter 605, F.	I am familiar with and S. Or, if this document is
New Registered Agent's Signature, if changing Registered agent provisions of all statutes relative to the proper and caccept the obligations of my position as registered a being filed to merely reflect a change in the register.	Enter to act in complete performant as provided for ed office address, I	our records, enter the er Florida street address Florida street address Florida street address This capacity. I further of my duties, and or in Chapter 605, F.	ida Eip Code her agree to comply with the Lam familiar with and

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	Landen Gee	1296 PEREGRINE WAY WESTON, FL 33327	■Add
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If an effecti Note: If	date, if other ve date is listed, the date inserte is effective date	the date must be ed in this block	specific an does not	id cannot be ineet the a	pplicable	e of filing o statutory fi	r more than ling requir	90 days af	tions*/ ler (iling.) l his date w	Pursuant to 60 ill not be li	05 02( steå r
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Dated	1	<del></del>		2024							
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