

L99 0000001570

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(Address)

(City/State/Zip/Phone #)

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16 DEC 28 PM 12:28
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TALLAHASSEE, FLORIDA

DEC 29 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 6, 2016

JAMES H FALLACE, ESQ
1900 HICKORY STREET SUITE A
MELBOURNE, FL 32901

SUBJECT: SPECIALTY INVESTMENTS, L.C.
Ref. Number: L99000001570

We have received your document for SPECIALTY INVESTMENTS, L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 516A00025927

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Specialty Investments, L.C.

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:

James H. Fallace, Esq.

Name of Person

Fallace & Larkin, L.C.

Firm/Company

1900 Hickory Street, Suite A

Address

Melbourne, FL 32901

City/State and Zip Code

jim@fallacelarkinlaw.com

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

RECEIVED
2016 DEC 28 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

James H. Fallace, Esq.

321 951-9900
at ()

Name of Person

Area Code

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

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Specialty Investments, L.C.

(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 March 19, 1999 and assigned
Florida document number L99000001570.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Specialty Investments, LLC, a Florida limited liability company

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)

800 E. Melbourne Ave.

Melbourne, Florida 32901

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 223

Grant, Florida 32949

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:

James H. Fallace

New Registered Office Address:

1900 Hickory Street, Suite A

Enter Florida street address

Melbourne

Florida 32901

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 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	Barbara A. Switzler, Manager	P.O. Box 223, Grant, FL 32949	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

In accord with the provisions of Section 605.0201(3)(a) Fla. Stat. and Section 605.0407 Fla. Stat., the Company
shall be: "manager-managed".

FILED
16 DEC 28 PM 12:28
TALLAHASSEE, FLORIDA

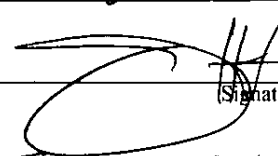
E. Effective date, if other than the date of filing: _____ **(optional)**

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated December 24, 2006.



(Signature of a member or authorized representative of a member)
JAMES H. Fallocc Esq. Attorney for Member

(Typed or printed name of signer)