

L0400065493

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number: 1-888-321-0183

From: Account Name: M/M/G CORPORATE RPT COMPANY
Account Number: 07-00000005
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DOWNTOWN SHOPS, LLC

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D. BRUCE
JUL 14 2010
EXAMINER

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③ H10000160921

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

DOWNTOWN SHOPS, 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 9/02/2004 and assigned Florida document number LC4000065493

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2999 NE 191 ST PHB
AVENUE, FL 33180

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2999 NE 191 ST PHB
AVENUE FL 33180

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FLORIDA

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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:

New Registered Office Address:

Enter Florida street address

_____ Florida _____

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 608, 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

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MANAGER	JOSE M SARDIE		<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	CLAUDIO MEHLER	2999 NE 191 ST PH 8 AVENUE S FL 33180	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated July 13, 2010



JOSE SARDIE

Typed or printed name of signer

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