

W05000010316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

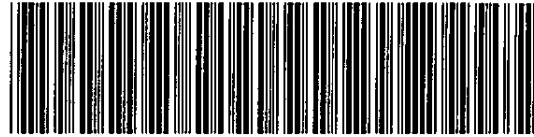
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

M. Thomas MAY 30 2008

Law Offices
DONALD A. GOLDEN, P.A.

11755 S.W. 62nd Avenue
Pinecrest, Florida 33156

Telephone: (305) 667-2844
Facsimile: (305) 740-0513

E-mail: goldmiami@mindspring.com

May 27, 2008

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: 835 Michigan, LLC

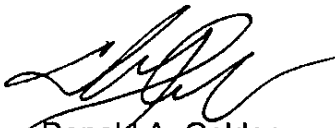
Dear Sir or Madam:

Enclosed for filing please find Articles of Amendment to Articles of Organization of 835 Michigan, LLC and Resignation of The Michigan Group, Inc. as a manager member of the captioned limited liability company.

I also enclose our check made payable to the Florida Department of State in the amount of \$50.00 in payment of the filing fees for the enclosed documents.

If you have any questions or require any further information, please contact the undersigned.

Very truly yours,


Donald A. Golden
For the Firm

Enclosures

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

835 MICHIGAN, 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 January 8, 2005 and assigned Florida document number L05000010316.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

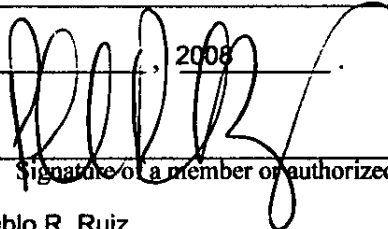
**MGR = Manager
MGRM = Managing Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	David C. Adler	9130 South Dadeland Boulevard Suite 1804 Miami, Florida 33156	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated May 27



Signature of a member or authorized representative of a member

Pablo R. Ruiz

Typed or printed name of signee