

LD5000067085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

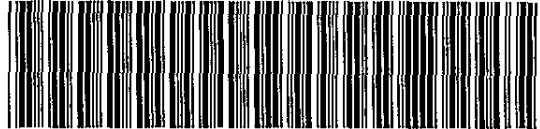
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Brickell on the River 1710 Unit, LLC
(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:

Ricardo L. Carmona
(Name of Person)

Ricardo L. Carmona, PA
(Firm/Company)

2800 Ponce De Leon Blvd. Suite 1160
(Address)

Coral Gables, FL 33134
(City/State and Zip Code)

For further information concerning this matter, please call:

Ricardo L. Carmona at (305) 447-3840 Tel. 305-447-3787 F
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|--|--|--|

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

Brickell on the River 1710 Unit, LLC

(Present Name)

(A Florida Limited Liability Company)

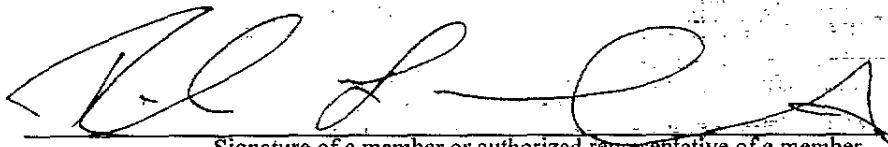
FIRST: The Articles of Organization were filed on July 7, 2005 and assigned document number L05000067085

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

1. Change the principal address to : 247 SW 8th Street, #359, Miami, FL 33130.
2. Change the mailing address to: 247 SW 8th Street, #359, Miami, FL 33130.

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Dated August 18, 2005



Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00