## LD6000086550

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EXAMINER

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TALLANASSEE. FLORIDA

## **COVER LETTER**

TO:	Registration S Division of Co			
SUBJE	CT:	The Colony	Capital Group, LLC	
			ited Liability Company	
The enc	losed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please r	eturn all corresp	oondence concerning this matte	er to the following:	
			Name of Person	
			Name of Calabri	
			Firm/Company	
8912 E. Pinnacle Peak Rd f9-585				
			Address	
Scottsdale AZ 85255				1A2 20
			City/State and Zip Code	AH.
		E-mail address: (	to be used for future annual report notifical	2011 MAR 14 SECRETARY ALLAHAGSE
For furth	ner information	concerning this matter, please of	call:	
	Nome	of Person	at ()	
	Name	ot rerson	Area Code & Daytime T	etephone Number
Enclosed	d is a check for	the following amount:		
\$25.0	00 Filing Fee	\$30,00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist Divisi P.O. B	ING ADDRESS: ration Section on of Corporations fox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 32301	ons r Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

 $|A_{ij}|||(P_i^{k_i}) = S_{ij}^{k_i} = \frac{1}{2}$ 

The Colony Cap	<u>ital Group, Ll</u>	<u>_C</u>				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appear Liability Company)	<u>rs on our reco</u>	ords.)			
The Articles of Organization for this Limited Liability Company	were filed on	09/11/2	09/11/2008		_ and assigned	
Florida document numberL08000086550						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liab	ility company her	<u>·e</u> :				
Colony Tre						
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Compa	my," the desig	nation "LLC	or the	abbreviation	
Enter new principal offices address, if applicable:	1320 SE 1ST	WAY	<u> </u>	20		
(Principal office address MUST BE A STREET ADDRESS)	DEERFIELD	BEACH FL	33411	I MAR		
			) in			
			الله الله الله الله الله الله الله الله	+		
Enter new mailing address, if applicable:			11. 11. 11. 11. 11. 11. 11. 11. 11. 11.	AH	1-F1	
(Mailing address MAY BE A POST OFFICE BOX)			12	<del></del>		
			72>			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records,	enter the	name (	of the new	
Name of New Registered Agent:						
New Registered Office Address:						
	Enter Florida street address					
	City			Zip Cod	e	

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

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> Name 1 **Address Type of Action** ☐ Add Remove Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Ron Russell Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00