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SECRETARY OF STATE
PALLAHASSEE, FINDING

B. BOSTICK

JAN 1 2 2011

EXAMINER

COVER LETTER

TO: Registration S Division of Co		
*	BORGOGNONI LAW, PL	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are submitted for filing.	
Please return all corresp	ondence concerning this matter to the following:	
	Gregory P. Borgognoni Name of Person	-
	. Name of Letson	
	BORGOGNONI LAW, PL	_
	Firm/Company	
	121 Alhambra Plaza, Suite 1500	
	Address .	- #
	Coral Gables, FL 33134	11 JA SECRE
	City/State and Zip Code	ASSS
	gborgognoni@boeslaw.com E-mail address: (to be used for future annual report notification)	We -
For further information	concerning this matter, please call:	AMID: 54 GF STATE FLORIDA
Gregory P. Borg	ognoni/Carmen R.German at (305) 671-3323	A
Name (of Person Area Code & Daytime Telephone Number	<u></u>
Enclosed is a check for t	the following amount:	
\$25.00 Filing Fee	(additional copy is enclosed) Certified	ate of Status &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Compa (A Florida Limited	NI LAW, PL ny as it now appears on our liability Company)	r records.)	
. The Articles of Organization for this Limited Liability Company	were filed on 10/0	02/2009	_ and assigned
Florida document numberL0900095368			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
N/A			
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the	designation "LLC	or the abbreviatio
Enter new principal offices address, if applicable:	121 Alhambra Plaza	a, Suite 1500	
(Principal office address MUST BE A STREET ADDRESS)	Coral Gables, Florid	la 33134	
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 here		la 33134 EF STA	AN TO
Name of New Registered Agent: Gregory P. I	Borgognoni		
New Registered Office Address: 121 Alhamb	ra Plaza, Suite 1500		
	Enter Flori	ida street addres	S
	Miami	, Florida	33134
	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

Page Vof 2

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:

	<u>Name</u>			Address	Type of Action
	Gregory P.	. Borgognoni		2665 S. Bayshore Dr.	
				Suite 701	✓ Remove
				Miami, FL 33133	
	Gregory P.	. Borgognoni,	P.A.	121 Alhambra Plaza	 Add
				Suite 1500	Remove
				Coral Gables, FL 33134	
					☐ Add
					Remove
					
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Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 28, 2010

GREGORY P. BORGOGNONI 121 ALHAMBRA PLAZA SUITE 1500 CORAL GABLES, FL 33134

SUBJECT: BORGOGNONI LAW, PL

Ref. Number: L09000095368

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

The registered agent must sign accepting the designation.

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) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 810A00029960

11 JAN 11 AM 10: 54
SECRETARY OF STATE
TALLAHASSEE FINAL