

Florida Department of State

Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 601 ICON BRICKELL LIMITED LIABILITY COMPANY

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AUG. 25, 2011 4:55PM RICARDO MARTINEZ

FLORIDA BAR NO. 157029 / AUDIT NUMBER: H11000131755 3

RICARDO MARTINEZ-CID

Professional Association Attorney at Law

> 1699 Coral Way, Suite 510, Miami, Florida 33145-2860 Telephone (305) 859-7494 Facsimile (305) 858-2513 E Mail: MTNEZCID@AOL.COM

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SEND TO: Florida Department of State '

Division of Corporations

P. O. Box 6327

Tallahassee, Florida 32314

(850) 617-6383 VIA:

SENT BY: Ricardo Martinez-Cid, Esq.

August 25, 2011 DATE:

Gentlemen:

Kindly, process the following amendment. Thank you for your cooperation.

Sincerely,

Martínez-Cid

Ricardo Martinez-Cid

RMC/nq

cc: marianbello@latingt.com,

jorge.aguirre@citynational.com,

marianbello@latingt.com,

aymee.morales@citynational.com

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Prepared by: Ricardo Martinez-Cid

1699 Coral Way, Suite 510 Miami, Florida 33145-2860

FLORIDA BAR NO. 157029 / AUDIT NUMBER: H11000131755 3

COVER LETTER

TO: Registration Se Division of Cor					
SUBJECT: 601		MITED LIABILITY CO	MPANY		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	RICAR	DO MARTINEZ-CID, ESQ		•	
	RICAR	DO MARTINEZ-CID, P.A.		78 1	
		Firm/Company			60 to 100 to
	169	9 Coral Way, Suite 510		RIII AUG 25 SECIPETARY ALL'AHASSE	
		Address			
	Mia	mi, Florida 33145 -286 0		AH 9: 0	FILED
		City/State and Zip Code		9: 34 STATE ORIDA	_
	12	mtnezcid@aol.com o be used for future annual report noti	~		
	•	-	ocauon)		
For further information co	oncoming this matter, please c	all:			
RICARDO M	ARTINEZ-CID, ESQ.	at (305)	632 1950		
Name of	Person	Area Code & Daytin	ne Telephone Number		
Enclosed is a check for th	e following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	f) Certified (of Status &	

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327 Tailahassee, 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

601 ICON BRICKELL	LIMITED LIABILIT	Y COMPANY	
(Name of the Limited Liability (A Florida	Limited Liability Company)	13 Off Our Tecorors	
The Articles of Organization for this Limited Liability (Company were filed on	11/23/2009	and assigned
Florida document numberL090000112422	<u>_</u> ·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company he	<u>rę</u> ;	20H AI
The new name must be distinguishable and end with the wo "L,L,C."	rds "Limited Liability Comp	any," the designation	"LDS for the breviation SSE
Enter new principal offices address, if applicable:			us T
(Principal office address MUST BE A STREET ADD)	RESS)		[v
			<u> </u>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office add	tered office address on o	our records, <u>enter</u>	the name of the nev
Name of New Registered Agent:			
New Registered Office Address:	En	ter Florida street aa	ldress
	•		····
	City	, Florida _	Zip Code
New Registered Agent's Signature, if changing Registere	•	,	

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, gater the title, pame, and address of each Manager or Managing Member being added or removed from our records:

MGR ≒ Mad MGRM = M	nger anaging Member					
Title	Name .	Address	Type of Action			
M/P/ST	MARIAN BELLO LUY	465 Brickell Avenue, Unit 601 Miami, Florida 33131		•		
	,		Add Remays			
			Add Reniove			
			Add Remove	ALLA A	2011 Aug	
				355	3 3 7	
	·)	
D. Humendi	ng muy other information, enter chang	se(s) livre: (Attach additional sheets, if nevessory:)	-		•	
			-			
Dated	-May 13 / 20	111	-			
-	Signsture of a meginic	or applionized representative of a member				
	MARIAN BELLO LUY, M	anager, President, Secretary-Treasurer or printed name of signes				
	, support	Page 2 of 2				

Filing Fee: \$25.00