Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

STEARNS WEAVER MILLER WEISSLER ALHADEFF SETTERSON

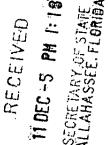
Account Number : I20060000135 Phone : (305)789-3200

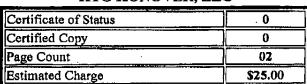
Fax Number : (305)789-3395

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HTG KONOVER, LLC





DEC 6 2011

Electronic Filing Menu

Corporate Filing Menu

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## SECRETARY OF STATE

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Company as it now and Limited Liability Companion Company were filed on		
ompany were filed on _	T . 05 0040	
	February 25, 2010	and assigned
<del>.</del>		•
ted liability company	here:	
ds "Limited Liability Co	npany," the designation "L	LC" or the abbreviation
ESS)		
***************************************		
	n our records, enter th	<u>ie name of the ne</u>
•	Enter Florida street addr	ess
City	, Florida	Zip Code
	ered office address of tess here:	ered office address on our records, enter the ess here:  Enter Florida street addr

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

MGR = Manager MGRM = Managing Member

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:

Title	<u>Name</u>	Address	Type of Action
<u>P</u>	Randy Rieger	3225 Aviation Ave., Suite 602 Coconut Grove, EL 33133	Add Remove
<u>VP</u>	Matthew Rieger	3225 Aviation Ave., Suite 602 Coconut Grove, FL 33133	Add Remove
<u>VP</u>	Shawn Wilson	3225 Aviation Ave., Suite 602 Coconut Grove, Ft. 33133	[7] Add Remove
ST	Mario Sariol	3225 Aviation Ave., Suite 602 Coconut Grove, FL 33133	Add Remove
<u>VP</u>	Ed Cohen	431 Fairway Drive Deerfield Beach, FL 33441	[☑]Add Remove
<u>VP</u>	David Coppa	431 Fairway Drive Deerfield Beach, Ft. 33441	Add Remove
D. If amer	nding any other information, en	ter change(s) here: (Attach additional sheets, if necessary.)	 
<b></b>	·		
Dated	December 5	, <u>2011</u> .	
	Signature of	fa member or authorized representative of a member  Matthew Rieger	
		Typed or printed name of signee	
		Dogo 2 of 2	

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Filing Fee: \$25.00