

GHEMA RALTY LLC

To: Florida Department of State.

Date: April 12, 2012

Enclosed is the check number 1037 for US\$ 30.00 for the filing fee & certificate of Status.

Our address is:

Ghema Realty, LLC

1900 Glades Road, suite 353

Boca Raton, Fl. 33431.

The telephone is 561 208-1110

Best Regards



Enrique V. Urdaneta

COVER LETTER

TO: Registration Section
 Division of Corporations

SUBJECT: GHEMA REALTY, 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:

ENRIQUE V URDANETA
Name of Person
GHEMA REALTY, LLC
Firm/Company
1900 GLADES RD, STE 353
Address
BOCA RATON, FL 33431
City/State and Zip Code
EUA2000@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ENRIQUE V URDANETA at (561) 2450634
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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**

GHEMA REALTY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
12 APR 16 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 11/03/2010 and assigned Florida document number L10000114404.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

GHEMA PARTNERS LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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 on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, **Florida** _____

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

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:

¹
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	GUILLERMO A ZULOAGA	1900 GLADES RD, STE 353 BOCA RATON, FL 33431	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ANTONIO E CABRERA	1900 GLADES RD, STE 353 BOCA RATON, FL 33431	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated APRIL 12, 2012



Signature of a member or authorized representative of a member

ENRIQUE V URDANETA

Typed or printed name of signee

FILED
12 APR 16 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA