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(((H11000100300 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

Enter the email address for this business entity to be used for furniannual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1438 MERIDIAN PARTNERS LLC

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Certificate of Status	0	
Certifled Copy	0	
Page Count	04	
Estimated Charge	\$25.00	

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EMPIRE CORP KIT

COVER LETTER HILOSOMO 300

TO: Registration Division of C				
SUBJECT:	1438 Meri	dian Partners LLC		
	Name of Lin	nited Liability Company		
The enclosed Articles	of Amenúmon and fee(s) are so	abmitted for filling.		
Please return all corres	pandence concerning this matte	er to the following:		
	·	Griska Arguello	<u> </u>	
		Nume of Person		
	Th	omas G. Sherman, P.A.		
		Firm/Company		
		90 Almeria Ave.		
		Address		
	C	oral Gables, FL 33134		
	A DESCRIPTION OF THE PERSON OF	City/State and Zip Code		
	grisk	a@uniontitleservices.com		
	E-mail addruss:	to be used for future annual report notificati	on)	
For further information	concerning this matter, please	call:		
G	riska Arguello	at (305) 44	5-4454	· 2
Name	Name of Person Area Code & Daytine Telephone Number		ë <u>≅</u>	
			A.H.	
Enclosed is a check for	the following amount:		ASS	2011 APR 15 SECRETARY
\$25.00 Filing Fee	S30.00 Filing Fer & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section of 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
Tallahassoe, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1438 Meridian Partners LLC						
(Name of the Limited Liability Company as it now appears on our records.) (A Florids Limited Liability Company)						
The Articles of Organization for this Limited Liability Company were filed on 03/31/2011 and assigned						
Florida document numberL11000038655						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liability company here:						
S & G OPERATING MIAMI, LLC						
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbound. L.C."	viation					
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						
A						
	_ T>					
Name of New Registered Agent:	73 J					
New Registered Office Address:						
Enter Florida street address						
, Florida	温 5					
City Zip Code T	-					
New Registered Agent's Signature, if changing Registered Agent:						
	141					

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 filled 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.

H Changing Registered Agent, Signature of New Resistered Agent

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PAGE 03/04

H († 000 100 300 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:

MCRM = 1	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
		•	Add Remove
			Add Remove
	***************************************		Add Remove
			Add Remove
			Aú4 Remove
			2011 APR 15 SECRETARY TALLWAHASSE
D. If amen	ding any other information, enter change	e(s) here: (Attach additional sheats, if necessary.)	2011 APR 15 AM & 17 SECRETARY OF STATE TALLWHASSEE, FLORIDA
Dated <u>Ap</u>	eril 1 5 , 201	TAP Con Olty	-
	_	or putiforized representative of a member	

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Filing Fee: \$25.00

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