

L12000032500

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TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ITALNORD SAWGRASS, 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:

Jorge R. Guitierrez, Esq.
Name of Person

Gutierrez & Yelin, P.L.
Firm/Company

100 Almeria Avenue, Suite 340
Address

Coral Gables, Florida 33134
City/State and Zip Code

Jorge.Gutierrez@gybpl.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark J. Boulris, Esq. at **(305) 717-1820**
Name of Person Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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**

ITALNORD SAWGRASS, LLC

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

The Articles of Organization for this Limited Liability Company were filed on March 6, 2012 and assigned Florida document number L12000032500.

This amendment is submitted to amend the following:

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

ITALNORD FORUM LV, LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

100 Almeria Avenue
Suite 340
Coral Gables, Florida 33134

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

100 Almeria Avenue
Suite 340
Coral Gables, Florida 33134

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TALLAHASSEE
FLORIDA

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:

Jorge R. Guiterrez, Esq.

New Registered Office Address:

100 Almeria Avenue, Suite 340

Enter Florida street address

Coral Gables

City

. Florida 33134

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:

MGR = Manager
MGRM = Managing Member

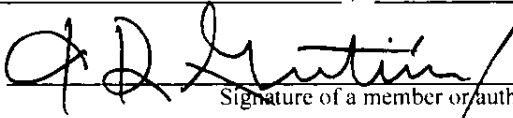
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Alfonso Entebi	c/o 1500 San Remo Ave.	<input type="checkbox"/> Add
		Suite 125	<input checked="" type="checkbox"/> Remove
		Coral Gables, FL 33146	
MGR	Alfonso Entebi	100 Almeria Avenue	<input checked="" type="checkbox"/> Add
		Suite 340	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

NONE

Dated August 22 , 2013



Signature of a member or authorized representative of a member

Jorge R. Gutierrez, as authorized representative

Typed or printed name of signee

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Filing Fee: \$25.00

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