

L12000036308

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6393

From: Account Name : FASTKIT CORP
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ENCLAVE UNIT 208, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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DEC 15 2014

S. YOUNG

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ENCLAVE UNIT 208, 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 03/14/2012 and assigned Florida document number L12000036308.

This amendment is submitted to amend the following:

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

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)

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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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LUIGI D APRUZZESE	2600 South Douglas Road, SUITE 501 CORAL GABLES, FL 33134	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	MARIA DEL ROSA RODRIGUEZ DE APRUZZESE	2600 South Douglas Road, SUITE 501 CORAL GABLES, FL 33134	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	GOLDEN SPRUCE MANAGEMENT, LLC	2600 S DOUGLAS ROAD, SUITE 501 CORAL GABLES, FLORIDA 33134	<input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

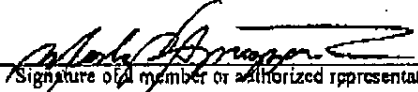
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated Dec. 12th, 2014.


Signature of a member or authorized representative of a member

MARK APRUZZESE
Typed or printed name of signer

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TALLAHASSEE, FLORIDA