Division of Corporations Electronic Filing Cover Sheet

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(((H13000010759 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number : I20000000205

: (305)416-6800

Fax Number

: (305)416-6811

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

 Address:		
MULLEDG:		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MIAMI REAL EXPOSURE, LLC

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

C. LEWIS JAN 1 5 2013

EXAMINER

(((H13000010759 3)))

COVER LETTER

TO:

Registration Section Division of Corporations

SHRIECT:

Miami Real Exposure, 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:

Diane M. Hernandez

Name of Person

Adams Gallinar, P.A.

Firm/Company

1000 Brickell Avenue, Suite 300

Address

Miami, Florida 33131

City/State and Zip Code

dhemandez@agilaw.com

E-mail address: (to he used for future annual report notification)

For further information concerning this matter, please call:

Diane M. Hernandez

,,305,416-6800

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

ELLED ((H130000107593))) (MSION OF COMPANY 1994

2013 JAN 14 AM 8: 46

(Name of the Limited Liabili (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability	Company were filed on December 4, 2012 and assigned
Florida document number L12000151631	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the bi	mited liability company here:
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADI	DRESS)
Enter new malling address, if applicable:	
# 7 AU	
(Mailing address MAY BE A POST OFFICE BOX)	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or reg	istered office address on our records, enter the name of the ne
B. If amending the registered agent and/or reg	istered office address on our records, enter the name of the ne
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	istered office address on our records, enter the name of the ne
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad Name of New Registered Agent:	istered office address on our records, enter the name of the ne
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	istered office address on our records, <u>enter the name of the ne</u> ldress <u>here</u> :
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad Name of New Registered Agent:	istered office address on our records, enter the name of the need dress here: Enter Florida street address
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad Name of New Registered Agent:	istered office address on our records, <u>enter the name of the ne</u> ldress <u>here</u> :
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad Name of New Registered Agent:	istered office address on our records, enter the name of the need dress here: Enter Florida street address City Zip Code
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Register	istered office address on our records, enter the name of the need dress here: Enter Florida street address City Zip Code red Agent;
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered agent the appointment as registered agent the provisions of all statutes relative to the proper accept the obligations of my position as registered	istered office address on our records, enter the name of the need dress here: Enter Florida street address Florida City Zip Code red Agent; at and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with and agent as provided for in Chapter 608, F.S. Or, if this document is
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered agent the appointment as registered agent the provisions of all statutes relative to the proper accept the obligations of my position as registered	istered office address on our records, enter the name of the need dress here: Enter Florida street address Florida City Zip Code red Agent; at and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with and agent as provided for in Chapter 608, F.S. Or, if this document is ared office address, I hereby confirm that the limited liability

Page 1 of 3

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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

Title MGR	Name Isaac Peckel	Address 2750 NW 3 Avenue	Type of Action Add
		Unit 9	Remove
		Miami, Florida 33127	
			[[Add
	· · · · · · · · · · · · · · · · · · ·		Remove
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			Remove

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ADAMS GALLINAR PA

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Division. D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2013 j	AN 14	AM 8: 4	6
	_		
	-		
Dated January 14 2013	- -		
4 Shaut	<u>,</u>		
Signature of a member or authorized representative of a member Robert R. Adams, Esq., Authorized Representative Typed or printed name of signee			

Page 3 of 3

Filing Fee: \$25.00