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EXAMINER



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COVER LETTER

	gistration S vision of Co			,		
SUBJECT:						
		Name of Lim	ted Liability Company			
The enclosed	d Articles of	Amendment and fee(s) are sul	omitted for filing.			
Please return	all correspo	ondence concerning this matter	to the following:			
C/o F			ERNANDA SHREWSBURY Name of Person			
		CAIX	ANOVA, MIAMI BRANCH			
			Firm/Company			
1111 B		1111 BRI	CKELL AVENUE, SUITE 26	500		
		M.				
			MIAMI, FLORIDA 33131 City/State and Zip Code			
: :,;		FOUDEW	•	N.4		
		E-mail address: (SBURY@CAIXANOVA.CO to be used for future annual report notific	cation)		
For further in	nformation of	concerning this matter, please of	all:			
F		DA SHREWSBURY	at (305) 755-91 Area Code & Daytime	191 - EXT.3368		
	Name	of Terson	Area Code & Daytime	reteptione Number		
Enclosed is a	a check for t	he following amount:				
\$25.00 F	iling 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)		
	Regist Division P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n ntions nter Circle		

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

NOVA AMERICA BRICKELL, 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 Florida document number L09000110752	Company were filed on	NOVEMBER 17, 2009	and assign	ed
This amendment is submitted to amend the following:	:			
A. If amending name, enter the new name of the li	mited liability company	<u>here</u> :		
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Cor	mpany," the designation "LLC"	or the abbr	eviation
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	DRESS)			0
			99	VISIO
			DEC	<u> </u>
Enter new mailing address, if applicable:			1	9.7.
(Mailing address MAY BE A POST OFFICE BOX)			70	120
			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	50.7
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac	gistered office address of	n our records, enter the r	name of th	Ä
Name of New Registered Agent:				
New Registered Office Address:				
2002 20	Enter Florida street address			
<u> </u>		, Florida		
	City	Z	ip Code	
New Registered Agent's Signature, if changing Registe	red Agent:			

If Changing Registered Agent, Signature of New 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 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	Name	<u>Address</u>	Type of Action				
MGRM	CARLOS CORRAL	1111 BRICKELL AVENUE, SUITE 2604 MIAMI, FLORIDA 33131	Add  Remove				
MGR	CARLOS CORRAL	1111 BRICKELL AVENUE, SUITE 2606 MIAMI, FLORIDA 33131	☑ Add ☐ Remove				
MGRM	JUAN CARLOS FONTAN	1111 BRICKELL AVENUE, SUITE 260 MIAMI, FLORIDA 33131	Add Remove				
MGR	JUAN CARLOS FONTAN	1111 BRICKELL AVENUE, SUITE 2606 MIAMI, FLORIDA 33131	À Add ☐ Remove				
MGRM	RAFAEL MERINO	1111 BRICKELL AVENUE, SUITE 2606 MIAMI, FLORIDA 33131	Add   Remove				
MGR	RAFAEL MERINO	1111 BRICKELL AVENUE, SUITE 2600 MIAMI, FLORIDA 33131	]				
D. If an	nending any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)					
	Please add another manager as fo	pllows:	_				
	MGR - GREGORIO GORRIARAN	with same address as 1111 Brickell Avenue	_				
	Suite 2600, Miami, Florida 33131						
			-				
Dated	November 23	2009	-				
fj.es							
	Signature of a member or authorized representative of a member						
 A.		al, as Deputy General Manager sed or printed name of signee					
٠.	1 ур	ed of printed name of signee					

Page 2 of 2

Filing Fee: \$25.00