Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COHEN, CHASE, HOFFMAN & SCHIMMEL, P.A.

Account Number : 102450002676 : (305)670-0201 Phone Fax Number : (305)670-6152

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GOLDEN RANGER, LLC**

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Corporate Filing Menu

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9/13/2010

N. Culligan SEP 1 4 2010

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ARTICLES OF AMENDMENT 10 SEP 13 AM 8: 38 TO SECRETARY OF STATE OF OF

GC	DLDEN RANGER, LLC	
(Name of the Limited L (A F	Jability Company as it now appear forida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited Lia	bility Company were filed on F	EBRUARY 4, 2010 and assigned
Florida document numberL100000127		
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	the limited liability company her	<u>e</u> :
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation
Enter new principal offices address, if applical	ble:	,
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered office address on o	ur records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	En	ter 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 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

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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

<u>Title</u>	Name	Address	Type of Action
MGR	Simon Cruz	2295 GALIANO STREET CORAL GABLES, FL 33134	Add Remove
MGR_	Scott Hodson	2295 GALIANO STREET CORAL GABLES, FL 33134	Add Remove
MGR	Terry Best	2295 GALIANO STREET CORAL GABLES, FL 33134	Add Remove
MGR	William H. Kerdyk, Jr	2295 GALIANO STREET CORAL GABLES, EL 33134	Add Remove
MGR_	Carlos Lopez-Cantera	2295 GALIANO STREET CORAL GABLES, FL 33134	Add Remove
D. If amondin	g any other information enter change	s) here: (Attach additional sheets, if necessary.)	Add Remove
	g any timer imormation, enter enauge(s) here: (Anach auamonat sneets, ij necessary.)	— -
	· · · · · · · · · · · · · · · · · · ·	A A H	FILED
Dated Sep	Signature of a member of	authorized representative of a member	AH 8: 33
_	PAU	JL A. LESTER	
	Typed or	printed name of signee	

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