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K. BALY EXAMINER DEC 8 2010

COVER LETTER

TO: Registration Division of	n Section Corporations				
SUBJECT:	GNJ I	Holdings LLC			
	Name of Lim	ited Liability Company	····		
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.			
Please return all corre	espondence concerning this matter	to the following:			
		Debra A Heyer EA Name of Person			
		Tax Team Inc			
Firm/Company					
	8569 Pines Blvd Ste 214				
		Address			
	Per	mbroke Pines FL 33024 City/State and Zip Code			
	de	bbie@ourtaxteam.com to be used for future annual report not			
For further information	e-mail address: (•	utication)		
De	ebra A Heyer EA	at (_954)	441-1404		
Nan	ne of Person	Area Code & Dayti	me Telephone Number		
Enclosed is a check for	or the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$\$55.00 Filing Fee & Certified Copy (additional copy is enclose	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		Registration Sect Division of Corp Clifton Building	orations		
Tallahassee, FL 32314		2661 Executive C Tallahassee, FL 3			

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

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SECRETARY OF STATE

GNJ Holdings 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 Liabilit		November 3 2010	and assigned	
Florida document numberL10000114672	·			
This amendment is submitted to amend the following	3:			
A. If amending name, enter the new name of the	limited liability company l	<u>iere</u> :		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Con	npany," the designation "LL	C" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET AL	ODRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX	<u></u>			
	· · · · · · · · · · · · · · · · · · ·			
B. If amending the registered agent and/or re registered agent and/or the new registered office a		n our records, <u>enter the</u>	e name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
_	C:	, Florida		
	City		Zip Code	
New Registered Agent's Signature, if changing Regist	tered 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

Type of Action <u>Address</u> **Title** <u>Name</u> MGRM NK Real Estate Holdings L 20533 Biscavne Blvd **✓** Add Remove Ste 1238 Aventura FL 33180 MGRM Kilinsky, Noham 20533 Biscayne Blvd ☐ Add Remove Ste 1238 Aventura FL 33180 ☐ Add ∏Add Remove ∏Add ___Remove □Add ☐Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 30 2010 Dated_ Signature of a member or authorized representative of a member Noham Kilinsky Typed or printed name of signee

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Filing Fee: \$25.00