

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H110002834793)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Number : 074222002135

Account Name : BAKER & MCKENZIE

Phone : (305) 789-8900

Fax Number

: (305)789-8953

Our file 50251984-1

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

Email Address:

cecilia.reategui@bakermckenzie.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 7724 FISHER ISLAND DRIVE LLC

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B. BOSTICK

DEC - 5 2011

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Corporate Filing Menu

EXAMINER

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

· us depend on		, Floride	2 ip Code
,			
THE INSTITUTE CHARLES	Enter Florida street address		
New Registered Office Address:			
Name of New Registered Agent:	- ANN AND -		
egistered agent and/or the new registered office addr	esa hero:	THE PERSON LAND IN	>
3. If emending the registered agent and/or registered	ered office stideess on t	ur records, enter t	he author of the n
		Market and the state of the sta	
Molling address MAY BE A POST OFFICE BOX	t the second sec		
Enter new mailing address, if applicable:			SS: 2
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	, and a second		
Principal office address MUST BE A STREET ADDR	ESS)	a a contract of the contract o	Eu.
Enter new principal offices address, if applicable:			
The new name must be distinguishable and end with the worl L.L.C."	ds "Limited Liability Compa	any," the designation "]	.I.C™ or the abbrevia
and the same same same same same same same sam	20 18 DHILL 2011 PP 19 101	<u> </u>	
A. If amending same, goter the new name of the limi	ted dehility company her	ne:	
This amendment is submitted to amend the following:			•
Florida document number <u>L110000B1710</u>	prom ¹		
The Articles of Organization for this Limited Liability C	ampany were filed on	07/15/2011	and assigned
(Name of the Consted Liability (A Florida I	Trunted Cleanity Combany)		

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

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document 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, Standars of New Registered Agent

Page 1 of 2

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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	Name	Address	Type of Action			
MGRM	Cecilia Santos Vaz Co	hen 7724 FISHER ISLAND DRIVE MIAMLEL 33109	Add Romave			
			[] Add [] Remove			
			Add Remove			
			Add Remove			
			[]Add []Remove			
D. If amending	g any other information, ent	er change(s) here: (Attach additional sheets, if necessary.)	·			
			11 DE TALLAR			
	December 1	2017	LARLASSEE			
Dated	elle	icelete (a sei)	ANIO:			
_	7	s member or suthorized representative of a member ernando Cohen as Manager/Member	E BA			
Typed or printed name of signee						
]	Page 2 of 2				
7111 The EDE 00						

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