Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

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Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

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Pasi 1	Addrass:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NEW RIVER III, LLC

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Page Count	03
Estimated Charge	\$25.00

nct - 8 2012

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIVISION OF CORPORATIONS

17 OCT -5 AM 8: 07

NEW R	VER III, LLC		
(Name of the Limited Linbilly Co (A Florida Limit	mpany as if now and ted Liability Compan	ears on our recurds.)	''''
The Articles of Organization for this Limited Liability Com	pany were filed on _	August 29, 2012	and assigned
Florida document numberL12000110967			_
This amendment is submitted to amond the following:			
A. If amonding name, enter the new name of the limited	liability company i	pere:	
The now name must be distinguishable and end with the words "L.L.C."	Limited Liability Cor	npany," the designation "LLC	or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	\$1		
Enter new malling address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	d office address o here:	n our records, <u>enter the</u>	name of the new
Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florido street address	1
		, Florida	7 0 1
New Registered Agent's Signature, if changing Desistered A.	City	4	Stp 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

Page 1 of 2

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> Citie</u>	Name	Address	Type of Action
MGRM	QUEST ANDREWS, LLC	C/O Rabina Properties 670 White Ptains Road_#305 Scarsdala, NY 10583	Add Remove
•			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. L'amendi	ng any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary	,
			SECRET DIVISION 12 OCT
			(±1, ∞ 1, 1)
Dated	CA	012 . To rauthorized (ep)esentative of a member	S AM 8: 07
_	J 1	EFFERY HOVOS	· · · · · · · · · · · · · · · · · · ·
-	Турс	d or printed name of signee	

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Filing Fee: \$25.00