## 10000096619

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JUN 17 2014

## **COVER LETTER**

TO: Registration Secti Division of Corpo		
	Bay Harbor, LLC	
SUBJECT:	Name of Limited Liability Company	
•		
The enclosed Articles of An	mendment and fee(s) are submitted for filing.	
Please return all corresponde	lence concerning this matter to the following:	
	Eric J. Grabois	
	Name of Person	<del></del>
	Eric J. Grabois, P.L.	
	Firm/Company	<del>-</del>
	407 Lincoln Rd., Ste 9-D	2
	Address	— Francisco
	Miami Beach, FL 33139	2H 16
	City/State and Zip Code	77 (c)
	eric@graboislaw.com  E-mail address: (to be used for future annual report notification)	
For further information cond	cerning this matter, please call:	35 55
Eric J. Grabo	ois 305 891-2029	
Name of Pe	at ()	er
Enclosed is a check for the f	following amount:	
■ \$25.00 Filing Fee	(additional copy is enclosed) Certific	Filing Fee, eate of Status & ed Copy hal copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1135 Bay Harbor, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records. Liability Company)	)
The Articles of Organization for this Limited Liability Company Florida document number L1000096619	were filed on September 15,	, 2010 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC	" or the abbreviation "Eth.C."
Enter new principal offices address, if applicable:	170 SE 14th Street	per per
(Principal office address MUST BE A STREET ADDRESS)	Ste. 1002	3
	Miami, FL 33131	\$4. <b>6</b>
Enter new mailing address, if applicable:	170 SE 14th Street	7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7
(Mailing address MAY BE A POST OFFICE BOX)	Ste. 1002	Çn: Li
	Miami, FL 33131	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:  Yohan Jaio	<u>e</u> :	enter the name of the n
170 05 14	th Street, Ste. 1002	
New Registered Office Address: 170 SE 14	Enter Florida street address	
Miami	Flor	rida 33131
	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 605, 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 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Claudine Jaieb	555 NE 15th Street	
		Suite 200	■ Remove
		Miami, FL 33132	
MGRM	Samir Jaieb	555 NE 15th Street	Add
		Suite 200	Remove
		Miami, FL 33132	100
MGR	Yohan Jaieb	170 SE 14th Street	Add <sup>FS</sup>
		Suite 1002	☐ Remove
		Miami, FL 33132	
MGR	Pascal Nicolai	170 SE 14th Street	<b>■</b> Add
		Suite 1002	☐ Remove
		Miami, FL 33132	
			🗖 Add
			Remove
		<del></del>	
			Remove

amending any other informa	ation, enter change(s) here: (Attach addition	nal sheets, if necessary.)
<del></del>		
	·	
Effective date, if other than the he effective date must be specific, can the date this document is filed by the Fl	e date of filing:  not be prior to date of receipt or filed date and cannot be lorida Department of State)	(optional) more than 90 days after
June 9	2014	
	Signature of a member or authorized representative of	f a member
	organization organization or dutitorized representative of	i a memoei
Yohan Jaiet		

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Filing Fee: \$25.00

2014 JUN 16 PMP: 53