Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	page. Doing so will	generate another cover she	
To:			
	Division of Con	rporations	
	Fax Number	: (850)617-6383	(2) (1) (1) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
From:			
	Account Name	: CORPORATE CREATIONS	INTERNATIONAL INC.
	Account Number	; 110432003053	
	Phone	: (561)694-8107	天王 天王
	Fax Number	: (561)694-1639	3 75

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

Email	Address	

THE GALLERY ON THE RIVER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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ARTICLES OF AMENDMENT ·TO ARTICLES OF ORGANIZATION

29/2015 15:13 3561:	2968430	*	1 4000 02,0
H15000105224	ARTICLES OF	AMENDMENT	J. 5 . 1
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	ARTICLES OF (ORGANIZATION	
	C)F	
. The Gallery on th	ne River, LLC		
	(Name of the Limited Liability Comp. (A Florida Limited	any aa it now appears on our recor- Liability Company)	STORY OF THE PARTY
The Articles of Organization fo	or this Limited Liability Company	were filed on 11/14/2011	and assigned
Florida document number L11			
riorida document maniber	· · · · · · · · · · · · · · · · · · ·		
This amendment is submitted t	to amend the following:		
A 76 11	.l A.B. N. 44 - 241 B	41.	
A. If amending name, enter	the new name of the limited liab	oility company here:	
The Gullery at West Brickell, LI	-C		
The new name must be distinguishab	ole and contain the words "Limited Liab	ility Company," the designation "LLC	O" or the abbreviation "L.L.C."
Enter new principal offices a	ddress, if annlicable:		
	ST BE A STREET ADDRESS)		
is tincipal office address my	ST DE A STREET ADDRESS		
Enter new mailing address, i	f applicable:		
(Mailing address MAY BE A	POST OFFICE BOX)		
D. If amonding the modes	nund warmt and/ay matetanad a	economica ou com pagand	ls, enter the name of the new
	eren agent and/or registeren o <u>tew registered office address ber</u>		s, enter the name of the new
- Server of Brown William Al Mile in	The state of the s	 .	
Name of New Regist	ered Agent:		
New Registered Office	ce Address:		
Tion Teor (Biology O)	<u> </u>	Enter Florida street addre	55
		, FI	lorida
		City	inp come

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

04/29/2015 15:19 5612968430

H15000105224
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGRM	The Gallery at West Brickell Manager, LLC	315 S BISCAYNE BOULEVARD, 4TH FLOOR	D Add
		MIAMI, FL 33131	D Remove
			Change
			[] Add
			Remove
			□ Change
			🗆 Remove
			Change
			□ Add
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:	D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days ofter filing.) Pursuant to 605.0207 (3)(1) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filled. Dated April 29th Signards of a brember or authorized representative of a member	
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Signature of a trember or authorized representative of a member	United
	Charles and the second
Tim Pratts, Attorney-in-Fact	
Typed or printed name of signed	

Page 3 of 3

Filing Fee: \$25.00