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12 FEB 17 M 10- 46
SECRETARY OF STATE

K.BALY EXAMINER FEB 2 2 2012

COVER LETTER

TÖ: S Regis Divis	stration Section of Corpo					
SUBJECT:						
Sebone			E 40 ST., LC ited Liability Company			
The enclosed A	Articles of A	mendment and fee(s) are sul	omitted for filing.			
Please return a	II correspond	lence concerning this matter	to the following:			
			Juan E. Rodriguez			
			Name of Person			
	Salomon, Kanner, Damian & Rodriguez, P.A.					
	Firm/Company					
		80 S.	W. 8th Street, Suite 25	550		
•			Address			
		<u> </u>	Miami, Florida 33130	and the second s		
	City/State and Zip Code					
		E-mail address: (driguez@skdrlaw.com to be used for future annual repo	t notification)		
For further info	ormation con	cerning this matter, please c	eall:			
		. Rodriguez	at (_305)	379-1681		
	Name of P	erson	Area Code & I	Daytime Telephone Number		
Enclosed is a c	heck for the	following amount:		*		
\$25.00 Fili	ng Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	Closed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Registrati Division of P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, FL 32314	Registration Division of C Clifton Build	Corporations		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

12 FEB 17 AH 10: 46

111 NE 40	ST., LC	FALLAHASSEE; FLORIDA
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appea Liability Company)	rs on our records.)
The Articles of Organization for this Limited Liability Company Florida document numberL0100004370	were filed on	March 21, 2001 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :
The new name must be distinguishable and end with the words "Lim"	ited Liability Comp	any," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	3801 N.W. 2	nd Avenue
(Principal office address MUST BE A STREET ADDRESS)	Miami, Floric	a 33127
•		
Enter new mailing address, if applicable:	3801 N.W. 2	nd Avenue
(Mailing address MAY BE A POST OFFICE BOX)	Miami, Florid	a 33127
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, enter the name of the new
Name of New Registered Agent:	,	
New Registered Office Address:		
-	Er	ter Florida street address
		, Florida
	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 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 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

Managing Member		
Name	Address	Type of Action
		Add Remove
		Remove
		D Damaria
		AddRemove
		Add
		Add Remove
ding any other information, e	enter change(s) here: (Attach additional sheets, if ne	cessary.)
2/-/	7010	
Z/ X	slith Land	
Signature		·
	Elizabeth Rosen	
	Name ding any other information, e	Name Address ding any other information, enter change(s) here: (Attach additional sheets, if ne Linguistic of a member or authorized representative of a member

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Filing Fee: \$25.00