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10:	Division of Cor					
SUBJE						
30831		- 	D TERRACE, LLC			
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
	NORMAN J. GINSPARG Name of Person					
	BRADFORD TERRACE, LLC Firm/Company					
	Firm/Company					
		12221 West Dixie Hwy				
	Address					
	NORTH MIAMI, FL 33161					
	City/State and Zip Code					
		E-mail address: (ginspargn@aol.com to be used for future annual report notif	ication)		
For fur	ther information c	oncerning this matter, please o	all:	·		
		an J. Ginsparg	at (_305)	298-2665		
	Name o	f Person	Area Code & Daytim	e Telephone Number		
Enclose	ed is a check for th	ne following amount:				
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	n ations nter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRADFORD TERRACE, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) May 29, 2001 The Articles of Organization for this Limited Liability Company were filed on _____ and assigned L01000008487 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City

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.

New Registered Agent's Signature, if changing Registered Agent:

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:

	Manager = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
· · · · · · · · · · · · · · · · · · ·			Add Remove
			Add Remove
D. Ifan	The Company is hereafter to be ma	ge(s) here: (Attach additional sheets, if necessary.) inaged by a manager or managers appoint ompany's Amended Operating Agreement.	ted
			
Dated	July 1 2	010 Ma	
	Signature of a member	er of authorized representative of a member	
		Morris Esformes	

Page 2 of 2

Filing Fee: \$25.00