## 0000/2806

(R	equestor's Name)
(A	ddress)
, (A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Chariel Instructions to	

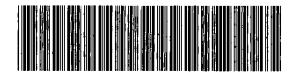
Special Instructions to Filing Officer:

A. LUNT

JAN -4 2010

EXAMINER

Office Use Only



100163872001

12/31/09--01046--022 \*\*190.00

## South Beach Resort Development LLC

58 EAST 79<sup>™</sup> ST, SUITE 5F NEW YORK, NY 10075 Tel: (212)360-6030

FAX: (212)360-7479

December 30, 2009

Florida Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl 32301

To whom it may concern:

Please find attached the required forms and filing fees to change an error on the Articles of Organization for both of the related entities De Soleil Management LLC and South Beach Resort Development LLC. The companies were listed as having a Managing Member of "South Beach Hotel LLC" when the actual name is "So Beach Hotel LLC".

Also please find attached the required forms and filing fees to change an error on the Fictitious Name Registration for "Z Ocean" as the name should be registered under South Beach Resort Development LLC.

I have included check # 1211 for \$190.00 to cover the two (2) articles of amendment at \$55/each and the one (1) fictitious name registration at \$80/each.

Thank you and feel free to contact me with any questions,

Lee Frank

Controller

South Beach Resort Development, LLC

So Beach Hotel, LLC

## **COVER LETTER**

TO: Registration Secti Division of Corpo			
SUBJECT:	: SoLEIL MA	NAGEMENT LLC	
	Name of Limite	d Liability Company	
	nendment and fee(s) are submence concerning this matter to	•	
·	LEE TO	RANK	200 TA
•		Name of Person	
	NYRE-	ASOCIATES (Firm/Company)	PILEL 2009 DEC 31 PH SECRETABY OF TALLAHASSEE, F
	58EAST	- 79TH ST - STE 5.	PH 1:55
	NEW YOU	RIZ NY 10075 City/State and Zip Code	DF: <b>W</b>
	L FRANK @	be used for future annual report notification)	1
For further information cond	cerning this matter, please call	l:	
LEE TRANK	erson	i at (217) 360- 6030 Area Code & Daytime Telephone	e Number
Enclosed is a check for the f	'ollowing amount:	· //	
\$25.00 Filing Fee	60.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	G ADDRESS:	STREET/COURIER ADDI Registration Section	RESS:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassec, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

- j.

DE SOLEIL MANAGE	ement LLC		
(Name of the Limited Liability (A Florida L	Company as it now appears o imited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on Hay	24, 2002 and assigned	
This amendment is submitted to amend the following: '			
A. If amending name, <u>enter the new name of the limit</u>	ed liability company here:		
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Company,	"the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	·		
(Principal office address MUST BE A STREET ADDRI	<u> </u>	EC 31 PH	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		Çri <b>G</b>	
B. If amending the registered agent and/or registered agent and/or the new registered office address.		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	. Enter	Florida street address	
	·	, Florida	
New Registered Agent's Signature, if changing Registered	City Agent:	Zip Code	
I hereby accept the appointment as registered agent a the provisions of all statutes relative to the proper and accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	d complete performance of ent as provided for in Chap	my duties, and I am familiar with and ter 608, F.S. Or, if this document is	
'	If Changing Registered Agent,	Signature of New Registered Agent	

MGR = Ma MGRM = M	nager Ianaging Member	· · ·	
<u> Title</u>	<u>Name</u>	Address	Type of Action
M G RM	SOUTH BENCH HOTEL LLC	420 LINCOLNRD STE 357 MIAMI BEACH, FL 33139	Add Remove
16RM	SO BEACH HOTEL LLC	420 LINCOLN Rd SIE 357 MIAMI BEACH, IL 33139	Add Remove
			DEC 3 RE
<del></del>			Remove Remove Remove
			Add Remove
). If amend	ing any other information, enter chang	ge(s) here: (Attach additional sheets, if necess	ary.)
Dated <u>De</u>	CEMBER 24TH . 200	<u> </u>	

Page 2 of 2

Filing Fee: \$25.00