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SECRETARY OF STATE
AHASSEE FLORID

N. O. AUG 2 6 2007

COVER LETTER

TO: Registration Section Division of Corpor			
SUBJECT: Flos	SSV DEVE (Name of Lim	LOPMENT, LLC	<u>-</u>
The enclosed Articles of Am	endment and fee(s) are sub	omitted for filing.	
Please return all corresponde	nce concerning this matter	to the following:	
-	Mr. Ov	MAC Frias (Name of Person)	
-	Karma	(Firm/Company)	
-	7010 E	Siscayne Blue	<u>.d.</u>
-	Miam	(City/State and Zip Code)	
For further information conc	erning this matter, please c	ali:	
Omar Fo	erson)	at (305 505 . 7) (Area Code & Daytime 7	
Enclosed is a check for the fo	ollowing amount:		
\$25.00 Filing Fee	1\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional 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

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:

Walton Jones + Browne

New Registered Office Address:

199 S.W. 27 th Ave, 1st Floor
(Enter Florida street address)

liami Florida 33145

tv)

(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 Changing Registered Agent, Signature of New Registered Agent)

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

MGR = Manager

MGRM = Managing Member **Title** Name Address **Type of Action** David F TUNNELL 7010 Biscayne Blud Mlami FL, 38178 MGRM OMAT FriAS 7010 Biscayne Blvd. Miami, FL 33138 Remove Add Remove 🗖 Add ☐ Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 08/18 Signature of a member of authorized representative of a member unnell Typed or printed name of signee

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