

L03000025269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

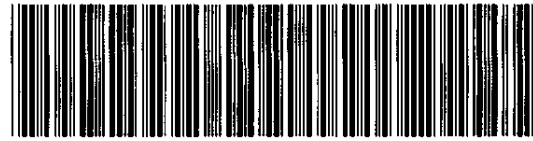
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
10 JUL 26 AM 11:29

T. HAMPTON

JUL 27 2010

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Setai Realty, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ronit Perez
Name of Person

Setai Realty, LLC
Firm/Company

PO Box 403548
Address

Miami Beach, FL 33140
City/State and Zip Code

rperez@setai.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ronit Perez at (305) 672-7900 ext. 6
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$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**

Setai Realty, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on July 11, 2003 and assigned Florida document number L03000025269.

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:

100 21st Street, Suite B

(Principal office address MUST BE A STREET ADDRESS)

Miami Beach, FL 33139

Enter new mailing address, if applicable:

PO Box 403548

(Mailing address MAY BE A POST OFFICE BOX)

Miami Beach, FL 33140

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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

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 Manager or Managing Member being added or removed from our records:

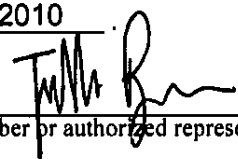
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	John Patrick Conroy, Jr	405 Lexington Ave, 54th Floor New York, NY 10174	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Nancy Ann Di Bernardo	405 Lexington Ave, 54th Floor New York, NY 10174	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Ronit Perez	100 21st Street, Suite B Miami Beach, FL 33139	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Dated July 20, 2010



 Signature of a member or authorized representative of a member
Jonathan Joseph Breene

 Typed or printed name of signee