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C. LEWIS

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EXAMINER

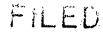
COVER LETTER

TO:

TO:	Registration Sec Division of Corp		•	,
SUBJI	ECT:	Barclay's Rea	al Estate Group, LLC	
. ~ `			ited Liability Company	
The en	closed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please	return all correspon	dence concerning this matter	to the following:	
Dennis R. Bedard, Attorney at La			.aw	
1717 No			rth Bayshore Drive, Suite Address	<u> 215 </u>
			Miami, Florida 33132 City/State and Zip Code	······································
dennisbedard@mac.com E-mail address: (to be used for future annual report n			notification)	
For fur	ther information co	ncerning this matter, please o	eall:	
	Denn Name of	is R. Bedard Person	at (305) Area Code & Day	5300795 vtime Telephone Number
Enclos	ed 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 enclo	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations (6327 see, FL 32314	STREET/COU Registration Se Division of Con Clifton Buildin 2661. Executive	rporations g

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Barclay	y's Real Estate Group, Ll		PR 29 BM 5: 02
(<u>Name of the Limited L</u> (A F	iability Company as it now appears lorida Limited Liability Company)		ETARY.OF STATE: Hasseeseeorida
The Articles of Organization for this Limited Lia	bility Company were filed on	7/23/2003	and assigned
Florida document number <u>L03000270</u>	<u>)46 </u>		
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	the limited liability company here	:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compan	y," the designation '	LLC" or the abbreviation
Enter new principal offices address, if applical	ble:		<u> </u>
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>		
B. If amending the registered agent and/or registered agent and/or the new registered offi	2	ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	Cir.	, Florida _	Zip Code
	City		zıр Соае

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 MGRM = Managing Member **Type of Action Title Name Address** 1717 North Bayshore Drive Unit 2933 MGRM Thibaut Rives De Lavayssee ☐ Add Miami, Florida 33132 **✓** Remove ☐ Add Remove ☐ Add Remove ☐ Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) representative of a member

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00