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SEGENTARY OF STATE,
MALLAHASSEE, FLORIDA

COVER LETTER

Division of Co			
SUBJECT:	Propert	ies Expo, LLC	
	Name of Limit	ted Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
,		Meir Ben-Nissan	·
		Name of Person	
	P	Properties Expo, LLC	
•		Firm/Company	
	:	3409 NE 169 Street	
	· · · · · · · · · · · · · · · · · · ·	Address	
	North	Miami Beach, Fl. 33160	
		City/State and Zip Code	
	E-mail address: (t	eir@ben-nissan.com o be used for future annual report notif	ication)
For further information	concerning this matter, please ca	all:	
	eir Ben-Nissan		915-5015
Name	of Person	Area Code & Daytim	e 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

Pi	roperties Expo, LLC			
(Name of the Limited Lia (A Flo	bility Company as it now appears orida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liabi	lity Company were filed on	3/18/2004	and assig	gned
Florida document numberL040002124				
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liability company here	:		
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Compan	y," the designation "L	LC" or the ab	breviation
Enter new principal offices address, if applicable	e:			
(Principal office address MUST BE A STREET A	DDRESS)			
				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO.	<u></u>			<u> </u>

B. If amending the registered agent and/or in registered agent and/or the new registered office		r records, <u>enter t</u>	he name of	the new
	···		屋的で	
Name of New Registered Agent:		· ·	- <u>(1) </u>	e Britainings Britaining
New Registered Office Address:		771 . I	25 1	interiora interiora interiora
	Ente	r Florida street add	ress:	M.
_	City	, Florida	⊋ip Code	
New Registered Agent's Signature, if changing Regi	stered 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 <u>Title</u> <u>Name</u> **Address** Type of Action MGR JDY National 20281 E Country Club Drive Aventura, Fl. 33180 ☐ Add Remove Remove ☐ Add ☐ Remove Add Remove □Add Remove ☐Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member of authorized representative of a member Meir Ben-Nissan

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00