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| (Requestor's Name) | | | | |
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| (Address) | _ | | | |
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| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
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| (Business Entity Name) | _ | | | |
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| (Document Number) | _ | | | |
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| Certified Copies Certificates of Status | _ | | | |
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| Special Instructions to Filing Officer: | 7 | | | |
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COVER LETTER

| TO: Registration S Division of Co | | | | |
|-----------------------------------|--|---|---|------------------------------------|
| SUBJECT: SAFO | , LLC | | | |
| | (Name of Lir | nited Liability Company) | | |
| | f Amendment and fee(s) are su nondence concerning this matte | - | | |
| | Jann Fisher | | | |
| | | (Name of Person) | | |
| | SAFO, LLC | | | |
| | | (Firm/Company) | | |
| | 10800 Biscayne B | oulevard, Suite 950 | | |
| | | (Address) | | |
| | Miami, FL 33161 | | | |
| | (| City/State and Zip Code) | | |
| For further information | concerning this matter, please | call: | | |
| Jann Fisher | | at (305) 891-0017 | | |
| (Name | of Person) | (Area Code & Daytim | | |
| Enclosed is a check for the | | | DEC 20 RETARY AHASSE | ALTERNATION OF THE PERSON NAMED IN |
| \$25.00 Filing Fee | □\$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certificate of Status (Certified Copy (additional copy is enclosed) | Tarana y |

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

| | SAFO, LLC | | |
|---------|--|----------|----------------|
| | (Present Name) (A Florida Limited Liability Company) | | |
| | | | |
| | | | |
| FIRST: | The Articles of Organization were filed on document number L0400061834 August 20, 2004 and assigned | | |
| SECOND: | This amendment is submitted to amend the following: | | |
| | Article IV is hereby deleted and is replaced by the following new Article IV: | | |
| | "The Manager is Northern Trust, N.A., | | |
| | 700 Brickell Avenue, Miami, FL 33131." | | |
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| | Eta O. I. A | | |
| | Signature of a member or authorized representative of a member | , | |
| | eterhen A. Lynch IR | | |
| | Typed or printed name of signee | | |

Filing Fee: \$25.00