Division of Corporations Electronic Filing Cover Sheet

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(((H100002713373)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name

: KOEPPEL LAW GROUP, P.A.

Account Number : I20070000064

: (561)659-6455

Phone Fax Number

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

₩EC AMND/RESTATE/CORRECT OR M/MG RESIGN TRUMP OFFICE CENTER, LLC

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DEC 20 2010

EXAMINER

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRUMP	OFFICE CENTER, I	<u>_LC</u>		•
(A Flori	ility Company as it now appe da Limited Liability Company	ars on our records.		
The Articles of Organization for this Limited Liabilit Florida document number		March 25, 2005	and assi	igned
This amendment is submitted to amend the following	· 4 •			
A. If amending name, enter the new name of the	imited liability company he	<u>ire</u> :		
The new name must be distinguishable and end with the "L.L.C." Enter new principal offices address, if applicable:	words "Limited Liability Comp	pany," the designation "LL	C" or the al	bbreviation
(Principal office address MUST BE A STREET AD	DRESS)			
12 - WWW. P.W. P.W. P.W. P.W. P.W. P.W. P.				
			200	2
			5-21	= "
Enter new mailing address, if applicable:	<u> </u>		- <u>FM</u>	
(Mailing address MAY BE A POST OFFICE BOX)			<u>24.≺</u> 22 <u>.</u>	<u> </u>
			1771 2575	
			, E. C.	
B. If amending the registered agent and/or reg registered agent and/or the new registered office as	distered office address on differess here:	our records, <u>enter the</u>	name of	the-new
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

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Dec. 17. 2010 2:33PM KOEPPEL LAW GROUP **H10000271337 3**

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

Title	<u>Name</u>	Address	Type of Action			
MGR	Pentacon Fl., LLC	400 S. Australian Avenue, #300A West Palm Beach, FL 33401	Add Remove			
MGRM_	Anthony C. Conte	400 S. Australian Avenue, #300A West Palm Beach, FL-33401	Add Remove			
wasta Militaria	 		Add Remove			
			Add Remove			
· · · · · · · · · · · · · · · · · · ·			Add Remove			
			Add Remove			
D. If amendin	g any other information, enter change(i) here: (Attach additional sheets, if necessary.)	ZUIDEC 17 AM SHI			
Dated	f,	authorized representative of a member				
Anthony C. Conte Typed or printed name of signee						

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Filing Fee: \$25.00