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Florida Department of State

Division of Corporations Public Access System

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CT CORPORATION SYSTM

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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

	(Present Name) (A Florida Limited Liability Company)	
first:	The Articles of Organization were filed on June 28, 2005 and assigned document numberL05000064212	ed
SECOND:	This amendment is submitted to amend the following:	
	Article I - The name of the limited liability company is: CPP Palm Harbor LLC	
	Article II - The street address of the principal office of the limited liability company is: 429 Santa Monica Boulevard Santa Monica, California 90401	OT JU TALL
	The mailing address of the limited liability company is: 429 Senta Monica Boulevard Santa Monica, California 9040!	AHASS AHASS
***	Article IV - The name and Florida street address of the registered agent is: CT Corporation System 1200 South Pine Island Road Plantation, Florida, 33324	F. F. S. 22
٠	Article V - The name and address of managing members/managers are: Title: MGRM CPF Palm Harbor Holdings LLC 429 Santa Monica Boulevard Santa Monica, California 90401	DM
	Tune 14 2007	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1

organized representative of a member

Soraya S. Hevia, Esq., Authorized Representative
Typed or printed ususe of signee

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Dated

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:
	CPP Falm Harbor LLC
2.	The name and the Florida street address of the registered agent and office are:
	C T Corponation System
	(Name)
	1200 South Pine Island Road
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Plantation, Plorida 33324
	City/State/Zip
liat age rela	ving been named as registered agent and to accept service of process for the above stated limited wilty company at the place designated in this certificate. I hereby accept the appointment as registered nt and agree to act in this capacity. I further agree to comply with the provisions of all statutes thing to the proper and complete performance of my duties, and I am familiar with and accept the gations of my position as registered agent as provided for in Chapter 608, Florida Statutes.
Ву:	Coupl Record, asstructury. (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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