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EXAMINER





ACCOUNT NO. : 072100000032

REFERENCE : 666208

AUTHORIZATION

COST LIMIT

ORDER DATE: July 29, 2008

ORDER TIME : 5:01 PM

ORDER NO. : 666208-025

CUSTOMER NO: 4302451

DOMESTIC AMENDMENT FILING

NAME:

AFRICA ISRAEL BRICKELL

DEVELOPERS, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Cindy Harris -- EXT# 2937

EXAMINER'S INITIALS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AFRICA ISRAEL BRICKELL DEVELOPERS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 9/2/2005

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The Articles of Organization for this Limited

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.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

18 1 Com

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	MR. ROTEM ROSEN	AFI USA 229 WEST 43RD STREET, 10TH FLOOR NEW YORK, NY 10036	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amer	nding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	_
-			_
–– –– Dated <u>JUL</u>	Y 29 ,	2008	_
	Signature of a particular signature of a par	member or authorized representative of a member	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00