

20600007169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

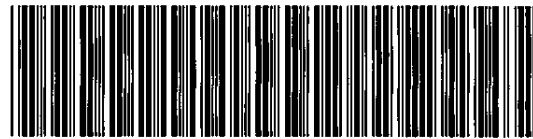
(Document Number)

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Special Instructions to Filing Officer:

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2006 APR 24 PM 2:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS  
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\$ 25

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

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SECRETARY OF STATE

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Shire Properties USA 2209, LLC  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

Walk in

Pick up time

Certified Copy

Mail out

Will wait

Photocopy

Certificate of Status

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input type="checkbox"/>            | Profit            |
| <input type="checkbox"/>            | NonProfit         |
| <input checked="" type="checkbox"/> | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |                                       |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment                             |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent            |
| <input type="checkbox"/> | Dissolution/Withdrawal                |
| <input type="checkbox"/> | Merger                                |

| OTHER FILNGS             |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

Examiner's Initials

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION**

PURSUANT TO SECTION 608.4081, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ADOPTED THE FOLLOWING ARTICLES TO AMEND TO ITS ARTICLES OF ORGANIZATION.

THE NAME OF THE ORGANIZATION IS:

**SHIRE PROPERTIES USA 2209, LLC**

**AMENDMENT ARTICLE**

THE ADDRESS OF THE ORGANIZATION IS CHANGED TO :

**999 PONCE DE LEON BLVD, SUITE 715  
CORAL GABLES, FLORIDA 33134**

**AMENDMENT ARTICLE**

THE MANAGERS OF THE ORGANIZATION IS CHANGED TO :

**SUSANNAH K. YOUNG  
999 PONCE DE LEON BLVD, SUITE 715  
CORAL GABLES, FLORIDA 33134**

**CALICO QUAYS, LTD.  
999 PONCE DE LEON BLVD, SUITE 715  
CORAL GABLES, FLORIDA 33134**

**AMENDMENT ARTICLE**

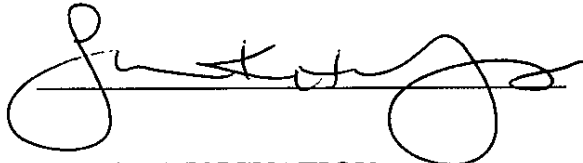
THE REGISTERED AGENT IS CHANGED TO :

**ARAGON REGISTERED AGENTS, INC.  
999 PONCE DE LEON BLVD, SUITE 715  
CORAL GABLES, FLORIDA 33134**

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THIS ARTICLES OF AMENDMENT WAS ADOPTED ON THE 20<sup>th</sup> DAY OF April, 2006.

**SHIRE PROPERTIES USA 2209, LLC**



**CERTIFICATE OF DESIGNATION**

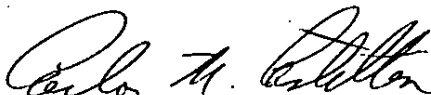
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provision of the Florida Statutes, the undersigned organization, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the organization is: **SHIRE PROPERTIES USA 2209, LLC**
2. The name and address of the registered agent and office is:

**ARAGON REGISTERED AGENTS, INC.  
999 PONCE DE LEON BLVD  
SUITE 715  
CORAL GABLES, FLORIDA 33134**

Having been named as Registered Agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of the statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.



Registered Agent

Dated: April 20, 2006