

L06 000037014

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((FI2000002380 3)))



H120000023803ABCQ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BERGER SINGERMAN - FORT LAUDERDALE
Account Number : I20020000154
Phone : (954) 525-9900
Fax Number : (954) 523-2872

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

Email Address: ray@baypointecolony.net

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
EMERALD POINTE TAMPA INVESTMENTS, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

RECEIVED

12 JAN -4 PM 12:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 JAN -4 AM 8:51

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

B. BOSTICK
JAN - 5 2011

EXAMINER
1/4/2012

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

EMERALD POINTE TAMPA INVESTMENTS, 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 04/07/06 and assigned
Florida document number L06000037014.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2699 W 79 STREET, #1

HIALEAH, FLORIDA 33016

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 960296

MIAMI, FLORIDA 33296

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

RALPH VELOCCI

New Registered Office Address:

2699 W 79 STREET, #1

Enter Florida street address

HIALEAH

Florida

33296

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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

H12000002380

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	JORGE MORERA	1637 NW 27 AVENUE, #200 MIAMI, FLORIDA 33125	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ALBERTO ARISSO	1637 NW 27 AVENUE, #200 MIAMI, FLORIDA 33125	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated: _____

Signature of a member or authorized representative of a member

Ralph Celucci

Typed or printed name of signer

Page 2 of 2

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 JAN -6 AM 8:52

2011

H12000002380