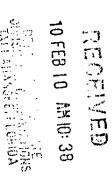
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PICK-UP WAIT MAIL	
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(Document Number)	
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Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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Office Use Only



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B. KOHR

FEB 1 0 2010

EXAMINER



REFERENCE : 280520 7644998

AUTHORIZATION : Spubbleman

COST LIMIT : \$25.00

ORDER DATE : February 10, 2010

ORDER TIME : 8:34 AM

ORDER NO. : 280520-005

CUSTOMER NO: 7644998

DOMESTIC AMENDMENT FILING

NAME: TRUMP II 3701, L.L.C.

ACCOUNT NO. : I2000000195

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER'S INITIALS:

ARTICLES OF AMENUMENT TO ARTICLES OF ORGANIZATION

ART		AMENDMEN	T			
A TOPPE	T(O PRGANIZATIO	ON:	Ex. Si		
AKII	LES OF O		UN	6 Top .		
	O.	.r·		(2) Tokan		
1	RUMP II 3	701, L.L.C.		10 600		
(Nume of the Limited (A	Jubility Compa Florida Limited (ny as it now appears liability Company)	s on our records.)	and assigned		
The Articles of Organization for this Limited Liz	bility Company	were filed on	May 1 2006	and assigned		
Florida document numberL06000044	857			•		
This amendment is submitted to amend the follo A. If amending name, enter the new name of		elity company here	::			
	TOWER II 37		•			
The new name must be distinguishable and end with "L.L.C."			ny," the designation "	LLC" or the abbreviation		
Enter new principal offices address, if applica	15901 Collins	Avenue #3701				
(Principal office address MUST BE A STREET ADDRESS)		Sunny Isles F	L 33160	 		
		· · · · · · · · · · · · · · · · · · ·				
Enter new mailing address, if applicable:		15901 Collins	Avenue #3701			
(Mailing address MAY BE A POST OFFICE BOX)		Sunny Isles F	L 33160			
B. If amending the registered agent and/o registered agent and/or the new registered off			ur records, <u>enter</u>	the name of the new		
Name of New Registered Agent:						
New Registered Office Address:	Enter Florida street address					
	<u>s</u>	Sunny Isles	, Florida	33160		
		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

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 = Mai MGRM = M	nager lanaging Member		
Title	Name	Address	Type of Action
	A STATE OF THE STA		Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	_
			-
Dated	February 10 ,	2010 L.J.	_
	Signature of uf	nember or authorized representative of a member	
		ILIAS MAREDIA Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00