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(Requestor's Name)
(Address)
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(1.7)
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MAY - 7 2013 J. BRYAN

COVER LETTER

TO: Registration Section Division of Corporation			,
SUBJECT: M	AMI ANGEL PROI		——————————————————————————————————————
	Name of Limit	ed Liability Company	7 6
The enclosed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	-6 PH 3: 24
Please return all correspond	lence concerning this matter	to the following:	2.2
	Ross M	icroy	
		Name of Person	
	MiAM A	Firm/Company	
		Firm/Company	
	429 LC	MOX AVE, SIE PSOS	
		Address	
	MiAmi 8	66441, FL 33139	
		City/State and Zip Code	
		be used for future annual report notification	on)
For further information con	cerning this matter, please ca	·	,
ROSS M	icroy	at (305) 788-1220	· · · · · · · · · · · · · · · · · · ·
Name of P	erson	Area Code & Daytime Tel	lephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ARTICI	LES OF AMENDMENT
ARTICL	ES OF ORGANIZATION OF
(Name of the Limited Liab (A Flori	LES OF AMENDMENT TO ES OF ORGANIZATION OF CITT PROPERTIES LLC cility Company as it now appears on our records.) ida Limited Liability Company) ty Company were filed on 5112006 and assigned
The Articles of Organization for this Limited Liability Florida document number <u>LO60004973</u>	
This amendment is submitted to amend the following A. If amending name, enter the new name of the	~
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	· nla
(Principal office address MUST BE A STREET AL	DDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	nla
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records, enter the name of the new address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action	
MGRM	MARC KNIGHT, P.A.	227 Michigan		
		MIAMI BEACH,	FL 33139 Remove	
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			Remove	
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			Add	
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). If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated	May 1st, 2013.	
	Runhal	
	Signature of a member or authorized representative of a member	···
	RUSS W. MILROM	西西西 下二
	Typed or printed name of signee	問言す
	Page 3 of 3	国 三
	Filing Fee: \$25.00	See of It
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		3: 24 FL BRI
		高品 子