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2010 APR 15 AM ID 50 SECRETARY OF STATE AHASSEE, FLORIDA

T. CLINE

APR 16 2010

EXAMINER

COVER LETTER

TO:

Registration Section

Division of	Corporations			
SIR IFCT.	Jupiter Ca	pital Partners LLC		
Name of Limited Liability Company				
	s of Amendment and fee(s) are su	,		
		•		
		Sandy Albanese Name of Person		
	Allied Capital an	d Development of South	Florida LLC	
		Firm/Company		
	11770 US Highway One, Suite 301			
				201 SH TAI
	Palm	Beach Gardens, FL 3340 City/State and Zip Code	08	CRE CRE
		@ACDofSouthFlorida.co		2010 APR 15 SECRETARY TALL AHASSI
For further information	on concerning this matter, please	•	ottireation)	
				OF STATE
Sandy Albanese Name of Person		at (561)	799-0050 time Telephone Number	
				ı &
Enclosed is a check for	or the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	sed) Certified	te of Status &
Reş Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, FL 32314	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations g : Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jupiter Capital	Partners LL0	C	•
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appea Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	June 27, 2007	and assigned
Florida document numberL0700067480			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :	
			7.0 28
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Comp	any," the designation "	LEO'br the abbreviation
Enter new principal offices address, if applicable:			SAR IS
(Principal office address MUST BE A STREET ADDRESS)			mo P
			70 75
			25 S
Enter new mailing address, if applicable:	11770 US H	ighway One, Suite	e 30 ⁴ ″
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, enter	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	E.	nter Florida street add	dress
		, 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Type of Action **Title** Name **Address** Richard L. Yellen **MGRM** 111 Broadway, 11th Fl ✓ Add New York, NY 10006 Remove Nicholas A. Mastroianni II MGRM 11770 US Highway One, Suite 301 ✓ Add Remove Paim Beach Gardens, FL 33408 Add 🔲 Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) April 12 2010 Dated ___ Signature of a member r authorized representative of a member Nicholas A. Mastroianni, II

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee