Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **METROPOLITAN 8, LLC**

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Metropolitan 8, LLC					
(Name of the Limited Li (A Fl	bility Com orida Limite	pany as it now appears of Liability Company)	n our records.)		
The Articles of Organization for this Limited Liabili	ty Compa	ny were filed on July S	5, 2007	and a	ssigned
Florida document number L07000069909					
This amendment is submitted to amend the following	g.	'4	,		
A. If amending name, enter the new name of the	limited lis	ability company here	,		
N/A	,	- 1, '		٠.,	
The new name must be distinguishable and contain the words	Limited Lia	ability Company," the design	gnation "LLC" or the abbi	reviation "	LILC."
Enter new principal offices address, if applicable		N/A			
(Principal office address MUST BE A STREET A	DRESS)			لقسر	DIA :
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Enter new mailing address, if applicable:		N/A 'T		ယ	
(Mailing address MAY BE A POST OFFICE BOX	2			5	끊으 - 알까
		<u> </u>		ល់	AA A
B. If amending the registered agent and/or r registered agent and/or the new registered office			ur records, <u>enter t</u>	he name	of the nev
Name of New Registered Agent:	'A				
New Registered Office Address:					
	5.25	Enter Florida	street address		
_		City:	, Florida	Zip Code	<u> </u>
New Registered Agent's Signature, if changing Regis	ered Agen	at:		•	

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 605, 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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

Title	<u> Nаше</u>	Address	Type of Action
MGR	Arthur Keiser	1900 W Commercial Blvd	
	The county of the second secon		
		Suite 180	
		Fort Lauderdail. FL 33309	
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			Change

	Management			
Mar	agement of the Company is vested in	the manager(s). The manager of the Con	many,	_
unti	his successor is duly elected as set for	rth in the Company's operating agreemen	nt, shall be Arthur Keiser."	
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