L07000088726

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600210444116

08/02/11--01008--011 **55.00

2011 AUG 19 AM 9: 18 SECRETARY OF STATE FALLAHASSEE, FLORIDA

J. SAULSBERRY EXAMINER AUG 22 2011

COVER LETTER

TO: Registration S Division of Co			·
SUBJECT:	ONDO QUEEN Name of Lin	MIAMI, LLC nited Liability Company	
The enclosed Articles o	f Amendment and fec(s) are su	abmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
		A. SEGAL Name of Person	
	CONDO	QUEEN MIAMI, LLC	
		VCLID AVE #10 Address	•
	,	Address BEACH F2 33/39 City/State and Zip Code 424 @ GMAIL CDM (to be used for future annual report notification	
	TEDDI	424 @ GMAIL, COM	6 W
For further information o	E-mail address:		AUG 19 AM 9: 18 CRETARY OF STATE AHASSEE, FLORIDA
ALAN S	E GAL of Person	at (<u>215)</u> 208 7 31 Area Code & Daytime Tele	
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fec	\$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)
Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assec, FL 32314	STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

August 17, 2011

To Whom It May Concern:

This letter is to inform the Division of Corporations that the principals are the same in both Teddi A. Segal, PA and Teddi A. Segal, LLC. I have included copied of my articles of incorporation to verify this.

Thank you for your prompt attention to this matter.

Teddi A. Segal

SECRETARY OF STATE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CONDO QUI	EEN MIAMI, LL	C		
(Name of the Limited L. (A F	ability Company as it now appears orida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liab Florida document number <u>Lo7000</u> 68	ility Company were filed on			
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the	e limited liability company here	:		
The new name must be distinguishable and end with to "L.L.C."	he words "Limited Liability Compan	y," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable	le:			
(Principal office address MUST BE A STREET	ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on ou	SECRETARY OF STRAME OF the new PALLAHASSEE, FLORIDARY OF STRAME OF THE NEW PARTY OF THE NEW		
Name of New Registered Agent:				
New Registered Office Address:		77		
Enter Florida street address				
_	City	, Florida Zip Code		
	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 = Ma $MGRM = M$	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			AddRemove
D. If amend	ling any other information, enter change((s) here: (Attach additional sheets, if necessary)	II AUG
			19 AM 9: 18 NRY OF STATE SSEE. FLORIDA
Dated	7/25 <u>201</u>	1	
	TEDDI A.	s authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00