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(Requ	uestor's Name)					
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DEPARTMENT OF STATE DIVISION OF CORPORATIONS

B. KOHR

MAR 1 7 2010

EXAMINER

10 MAR 1 7 PM 1: 13



ON SERVICE COMPANY			,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ACCOUNT NO.	:	I2000000	195	ONR 1 W
REFERENCE	:	318848	7459549	
AUTHORIZATION	:			14/
COST LIMIT	: 	\$ PPD	-	
ORDER DATE : March 17, 2010				
ORDER TIME : 9:32 AM				
ORDER NO. : 318848-005				
CUSTOMER NO: 7459549				
DOMESTIC AM	END	MENT FILTN	 3	
		***************************************	<u> </u>	
NAME: CHEECA CONDO, I	LLC			
EFFECTIVE DATE:				
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCOME.	RPO:	RATION		
PLEASE RETURN THE FOLLOWING AS I	PRO	OF OF FILI	NG:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STAN	NDI	NG		
CONTACT PERSON: Carina L. Dunla	ар	EXT# 29!	51	

EXAMINER'S INITIALS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(Name of the Limite	Cheeca Co	ondo, LLC	re on our records				
(Name of the Limite	A Florida Limited	Liability Company)	is on our records.)				
The Articles of Organization for this Limited Liability Company were filed on11/02/2007 and ass							
Florida document numberL0700011	1434						
				•			
This amendment is submitted to amend the following	llowing:						
A. If amending name, enter the new name	of the limited liab	oility company her	re:				
			-				
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Compa	nny," the designation "I	LC" or the abbreviation			
Enter new principal offices address, if applicable:		81801 OVER	SEAS HIGHWAY	,			
(Principal office address MUST BE A STREET ADDRESS)		ISLAMORADA FL 33036					
		-					
				,			
Enter new mailing address, if applicable:							
(Mailing address MAY BE A POST OFFICE	<u>E BOX)</u>						
							
B. If amending the registered agent and	or registered of	fice address on o	our records, <u>enter t</u>	he name of the nev			
registered agent and/or the new registered of	office address her	<u>e</u> :					
Name of New Registered Agent:	Mann & Wolf, LLP						
New Registered Office Address:	4300 N. University Drive, Suite C-203						
		Enter Florida street address					
		Sunrise	, Florida	33351			
	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** <u>Name</u> **Address** MGR Shirley Cohen ☐ Add ☑ Remove 1819 SE 17th Street Apt. 1407 Ft. Lauderdale, FL 33316 Wycheeca, LLC MGRM P.O. BOX 14250 ☐ Remove JACKSON WY 83002 ☐ Add Remove ☐ Add Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 2010

Typed or printed name of signee
Page 2 of 2

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Signature of a member or authorized representative of a member

Andrew L. Mann, Esq.