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D. BRUCE

FEB 28 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporati	ons	•			
SUBJECT: <u>Frontier</u>	Voternation Name of Lim	onal LLC. hited Liability Company		·	
The enclosed Articles of Amend	dment and fee(s) are su	abmitted for filing.			
Please return all correspondence	e concerning this matte	er to the following:			
	Fore Fronti 1852 North	Name of Person Let Thernational, L' Firm/Company WE WHA Street Address Miami FL 33181 City/State and Zip Code	LC.		12 FF B
For further information concern	•			ARY OF ST	
Name of Person		at (305) 343 - 14 Area Code & Daytime	Na Number	RIDA	in S
Enclosed is a check for the follo	wing amount:				
\$25.00 Filing Fee S	30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status &	

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

Frontier Tate	enational LLC.		
(<u>Name of the Limited Liabi</u> (A Floric	lity Company as it now appears on our records.) da Limited Liability Company)		
The Articles of Organization for this Limited Liability			
Florida document number <u>Lo7000 119233</u>	<u> </u>		
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li	imited liability company here:		
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
	7 7 7 T		
Enter new mailing address, if applicable:	S 2 7		
(Mailing address MAY BE A POST OFFICE BOX)			
•	R을 25		
B. If amending the registered agent and/or regregistered agent and/or the new registered office agent and/or the new registered agent and/or the new registered agent agent and/or the new registered agent	gistered office address on our records, enter the name of the new		
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 = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>mgr</u>	Fares Chandour	1852 NE 144H St North Miami, FC 33181	Add Kemove
<u>mgr</u>	Infiniti Real Estate UC	1852 NE 144H St North Miami, FL 33181	Add Remove
<u>mgr</u>	Global Advising uc.	13801 NE 3rd Court B128 North Miami, FL. 33161	Add Remove
			Add Remove
	•		Add Remove
·			Add Remove
D. If amend	ding any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
. — —			FILED FEB 27 PH S. 25 LAHASSEEI HLORIGA
Dated	N/24/2012 , Signature of a fremble of	or authorized representative of a member	
	11	CHANDOUR r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00