

Division of Corporations Public Access System

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TOI

Division of Corporations

Fax Number

: (850)617-6383

Fron

: CANTOR & WEBB P.A. Account Name

Account Number : I20060000108

: (305)374-3886

Phone Fax Number

: (305)371-4564

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

STATE

APOGEE 1802 LLC

| Certificate of Status | 0 |
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Corporate Filing Menu

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1/29/2008

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ARTICLES OF AMENDMENT

| | | ARTIC | CLES OF ORGANIZATION OF | | |
|---------------------------------------|---|--|--|--|--|
| | <u>APO</u> | GEE 1802 LLC (Name of the Limited I | Jability Company as it now appears on our recor Torids Limited Liability Company) | 145.) | |
| The Artic | les of Org | nization for this Limited Lia | bility Company were filed on January 25, 20 | 008 and assigned | |
| Florida d | ocument ni | mber <u>LO8000009291</u> | | | |
| This ame | ndment is a | ubmitted to amend the follow | ving: | OB JAN SECRE TALLAR | |
| A. If an | ending na | ne, enter the new name of t | he limited liability company here: | 129 HAS | |
| n/a | | | | SE | |
| The new i | iame must b | e distinguishable and end with the words "Limited Liability Company," the designation "LLC" of the abbreviation. | | | |
| | | te registered agent and/or d/or the new registered offi | registered office address on our records, <u>ca address bere</u> : | | |
| | Name of N | ew Registered Agent: | n/a | - <u> </u> | |
| | New Regis | ered Office Address: | n/a | | |
| | | | (Enter Florida street address) | | |
| | | | (City) | rida(Zip Code) | |
| | | | (Cuy) | (zip Code) | |
| New Reg | stered Age | t's Signature, if changing Re | pistered Agent: | | |
| the provi accept the being file | sions of all e obligations ed to mere | statutes relative to the pro ns of my position as regist | agent and agree to act in this capacity. I furt oper and complete performance of my duties, ered agent as provided for in Chapter 608, F gistered office address, I hereby confirm that hange. | and I am familiar with and S. Or, if this document is | |
| | | | (If Changing Registered Agent, <u>Signature or</u> | f New Registered Agent) | |
| | : | , | (((H08 | 8000024237 3))) | |

| If amend | ing the M | nagers or Manaoing Members o | n our records, enter the title, name, and add | ress of each Manager |
|----------|----------------------|-----------------------------------|--|-----------------------------|
| or Mana | eing Mem | er being added or removed from | n our records, enter the title, name, and add our records: (((H08000) | 124237 3))) |
| | Manager – Managit | g Member | | |
| Title | Na | <u>ie</u> | Address | Type of Action |
| MGR | На | mahera Limited | 1001 Brickell Bay Drive, #3112 Miami, Florida_33131 | Add Remove |
| MGR | <u>M</u> d | ines Limited | 1001 Brickell Bay Drive, #3112 Miami, FL 33131 | Add Remove |
| | | | | Add Remove |
| | | | | Add Remove |
| | | | | Add Remove |
| | | | | Add Remove |
| D. If an | ending an | other information, enter change(| s) bere: (Attach additional sheets, if necessary | .) |
| | | | | SE JA |
| | | | | N 29 HASS |
| Dated J | anuary 28 | 2008 Anno 10 | · | AN 8: 33 OF STATE EE FLORID |
| | Mory | Arnaro, Authorized Representation | D : | |
| | | Fill | 024237 3))) | |