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COVER LETTER

TO:

Registration Section **Division of Corporations**

Tallahassee, FL 32314

SUBJECT:	SKYLINE BF	RICKELL 1612, LLC					
	Name of Limi	ted Liability Company					
The enclosed Articles of An	mendment and fee(s) are sub	omitted for filing.					
Please return all correspond	ence concerning this matter	to the following:					
	JAMES MARX, ESQ.						
	Name of Person						
	BLASS, FRANKEL & MARX, P.A.						
	Firm/Company						
	ONE SE THIRD AVENUE, SUITE 2130						
	Address						
	MIAMI, FL 33131						
	City/State and Zip Code						
	JAMES@BFMLEGAL.COM E-mail address: (to be used for future annual report notification)						
•	E-mail address: (1	to be used for future annual report no	tification)				
For further information concerning this matter, please call:							
JAMES	MARX ESO	at (305)	377-9353				
JAMES MARX, ESQ. Name of Person			ime Telephone Number				
Enclosed is a check for the f	following amount:						
\$25.00 Filing Fee [\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
Registratio	of Corporations	STREET/COUR Registration Sect Division of Corp Clifton Building					

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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11 DEC 15 AM II: 10

SECRETARY OF STATE
ALLAHASSEE FLOOF

SKYLINE BRICKELL 1612, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Li		ere filed on	02/11/2008	and assigned				
Florida document numberL08000014	<u>958 </u> .							
This amendment is submitted to amend the follo	wing:							
A. If amending name, enter the new name of the limited liability company here:								
The new name must be distinguishable and end with "L.L.C."	the words "Limited	Liability Company,	" the designation "l	LC" or the abbreviation				
Enter new principal offices address, if applica	ıble:							
(Principal office address MUST BE A STREET ADDRESS)								
	-							
Enter new mailing address, if applicable:								
(Mailing address MAY BE A POST OFFICE BOX)								
B. If amending the registered agent and/o registered agent and/or the new registered off		e address on our	records, enter 1	he name of the new				
Name of New Registered Agent:	COPROLITE	Corporation	on					
New Registered Office Address:	1 SE 3rd Avenue, Suite 2130							
	Enter Florida street address							
	Miami		, Florida	33131				
Now Designated Assetts Signature if the prince D		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 **Title** Name <u>Address</u> **Type of Action** MGR Edgar E. Sabbagh 6604 Miller Drive ✓ Add Miami, FL 33155 Remove Riverhouse Management LLC MGR 1710 South Miami Avenue ☐ Add Remove Miami, FL 33129 ☐ Add Remove ∏ Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated December 14th 2011 Signature of a member or authorized representative of a member

EDGAR E. SABBAGH
Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00