## L08000064319

(Regu	uestor's Name)	
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Certified Copies	Certificate	s of Status

Special Instructions to Filing Officer:

A. LUNT

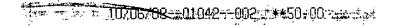
OCT - 7 2008

**EXAMINEF** 

Office Use Only



000136565170





## **COVER LETTER**

TO: Registration Sect Division of Corpo				
SUBJECT: COCO	SHOPPING CENTER	1.110.		
	(Name of Limi	ted Liability Company)		
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.	-vd	
Please return all correspond	lence concerning this matter	to the following:		
	KEVIN S.	GROSSFELD		
	1121111	(Name of Person)		
	ROSENTHAL R	OSENTHAL RASCO, LLC (Firm/Company)	Z009 OCT SECRET/ TALLAHA	וור
	20.75 NE	191st Street, Suite 50	S AS T	**********
		(Address)	O SSEE	i I
	Aventura	FL 33180 (City/State and Zip Code)	6 P 2: 32 Y OF STATE EE. FLORIDA	
For further information con	cerning this matter, please ca	atl:		
Eliette Con	Person)	at ( <u>305)</u> <u>937 - 030</u> (Area Code & Daytime T		
Parland in a short for A.	C-Nami-a amazarta			
Enclosed is a check for the			_	
\$25.00 Filing Fee	\$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	

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

## ÁRTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp	dany as it now appears on or Liability Company)	ur records.)
, (A Liožias rimitec	Liaotity Company)	
The Articles of Organization for this Limited Liability Compar	ny were filed on	2008 and assigned
Florida document number <u>LO8000064319</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lig	ability company here:	
-		TA.
The new name must be distinguishable and end with the words "Lin	mited Liability Company "th	ne designation LL or the abbreviation
"L.L.C."	inited Diabinty Company, in	220
		HAS OCT
Enter new principal offices address, if applicable:		SR
(Principal office address MUST BE A STREET ADDRESS)		E 0
		100 T
	,	0A 32
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered	office address on our ro	gords, ontor the name of the new
registered agent and/or the new registered office address he		cords, enter the name of the nev
	<del></del>	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	(Enter Fl	orida street address)
	•	,
	(0)	, 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRN_	PEREZ, GEORGE	alo BRR 2015 NE 1915: Street, Suite 500 Aventura, FL 33180	Add Remove
MGRM	URIBE, RAMIRO	clo RRR 2875 NE 19191 Street, Suite 500 Aventura, FL 33180	Add Remove
MGRM.	BOANO, GABRIEL	clo RRR 2875 NE 1915: Street, Suite 500 Aventura, FL 33180	Add Remove
<u>mgrm</u>	KOPETMAN, ED	ch RRR 2875 NE 191st Street, Suite 500 Aventura, FL 33180	Add Remove
<u>mgrm</u>	LEDERMAN, SAIME	clo RRR 2000 2875 NE 191st Street, Suite 500 Aventura, FL 33180	Add Remove
M6RM	PEISACH, ALBERTO	clo RRR  A875 NE 19191 Street Suite 500  Aventura FL 33180	Add D Remove
D. If amend	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary)	_ <b>0</b>
			_
	,		<del>-</del>
Dated	<u> 10101</u> , <u>2</u> 0	008	
	Signature of a memb	er or authorized representative of a member	
	•	N S. GROSSFELD, ESQ	
	Type	ed or printed name of signee	<del> </del>

Page 2 of 2

Filing Fee: \$25.00

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 <u>Address</u> <u>Title</u> <u>Name</u> Type of Action MBR ENDEAVOR COMMERCIAL CO RRR X Add GROUP, LLC 2875 NE 1915 Street, Suite 500 Remove MEMBER 33180 Aventura, FL ☐ Add Remove Add 🗖 Remove ☐ Add Remove □ Ald Kemove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 10/01 2008 Dated \_\_\_\_ Signature of a member or authorized representative of a member

Page 2 of 2

5. GROSSFELD ESO Typed or printed name of signee

KEVIN

Filing Fee: \$25.00