L08000014416

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EXAMINER

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COVER LETTER

TO: Registration Se Division of Cor	ection porations		
SUBJECT: ETIENNI	E VERNIER, LLC		
		ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JEFFREY J. GALVA		
		(Name of Person)	
	LAW OFFICES OF JE	EFFREY J. GALVAN, P.A.	
		(Firm/Company)	
	1900 CORPORATE B	LVD.SUITE 305 WEST	
		(Address)	
	BOCA RATON FL 33	431	
		(City/State and Zip Code)	
For further information co	oncerning this matter, please c	all:	
JEFFREY J. GALVA	AN, ESQ.	at (561) 994-5956	
(Name of Person)		(Area Code & Daytime Telephone Number)	
Enclosed is a check for th	ne following amount:		
□ \$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 enclosed)

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

ETIENNE VERNIER, 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 Liability Company were filed on JULY 2, 2008 and assigned Florida document number L08000064416 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: FLORIDA BISCAYNE PROPERTIES, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." NOT APPLICABLE Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: **NOT APPLICABLE** (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: NOT APPLICABLE Name of New Registered Agent: New Registered Office Address: (Enter Florida street addréss) (City)

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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
- Title	<u>Nume</u>	1 KGG 1 COO	1,000111000
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D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessor	ary.)
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	Signature of the Member	r or authorized representative of a member	50 ATE ADA

Page 2 of 2

Filing Fee: \$25.00