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(((H12000200130 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number : I20000000205 : (305)416-6800

Fax Number : (305)416-6811

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Emil Address:

🞖 LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **FHL DESIGN LLC**

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

B. KOHR AUG-9 2012 EXAMINER

COVER LETTER

(((H12000200130 3)))

10:	Division of Co			
SUBJE	CT:	FHL C	DESIGN, LLC	
30.00	<u></u>	Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are su	bmitted for filing.	G.
Please :	return all corresp	ondence concerning this matter	r to the following:	12 N/6 -8 M 9 4 6
			Diane M. Hernandez	
			Name of Person	至
	Adams Gallinar, P.A.			
			Firm/Company	4
	1000 Brickell Avenue, Suite 300			
			Address	
			Miami, Florida 33131 City/State and Zip Code	
		dh	ernandez@agilaw.com	
		E-mail address:	to be used for future annual report notification)	
For fun	ther information	concerning this matter, please	call:	
		M. Hernandez	at (305) 416-68	
	Name	of Person	Area Code & Daytime Telepho	ne Number
Enclose	ed is a check for t	he following amount:		
[]\$25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist Divisio P.O. B	JING ADDRESS: ration Section on of Corporations ox 6327 assec, FL 32314	STREET/COURIER ADI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	

(((H12000200130 3)))

ARTICLES OF AMENDMENT (((H120002001303))) TO ARTICLES OF ORGANIZATION OF

FHL DESI	GN, LLC	
(Name of the Limited Liability Compa) (A Florida Limited I.	ay as it now appears on our recurds.) Jability Company)	秀 _
The Articles of Organization for this Limited Liability Company Florida document numberL08000090019	•	ed ()
This amendment is submitted to amend the following:		至9
A. If amending name, enter the new name of the limited liab	vility company here:	5
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Company," the designation "LLC" or the abbr	reviation
Enter new principal offices address, if applicable:	2101 Brickell Avenue	
(Principal office address MUST BE A STREET ADDRESS)	Suite 2510	
	Miami, Florida 33129	<u></u>
Enter new mailing address, if applicable:	2101 Brickell Avenue	
(Mailing address MAY BE A POST OFFICE BOX)	Suite 2510	
	Miami, Florida 33129	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		the nev
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	9	

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.

> (((H12000200130 3))) 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: (((H12000200130 3)))

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Luis F. Lopes	2101 Brickell Avenue Suite 2212 Miami, Florida 33129	Add Remove
<u>MGRM</u>	Luis Fabiano Lopes	2101 Brickell Avenue Suite 2510 Miami, Florida 33129	Add Remove
MGRM	Hernan Arriaga	2101 Brickell Avenue Suite 2510 Miami, Florida 33129	Add Romove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.))
_			
Dated	August 1	2012 Kledarur	
	-	ember or authorized representative of a member	
	Robert R. A	Adams, Authorized Representative Typed or printed name of signee	
	•	yped or printed name of signee (((H12000200)	130 3)))

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Filing Fee: \$25.00