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JAN 15 2009

**EXAMINER** 



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DIVISION OF CORPCRATIONS

## **COVER LETTER**

Division of Co	orporations						
subject: P Rea	LEstate LLC		_				
COMMENT.	(Name of Limited Liability Company)						
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.					
Please return all corresp	ondence concerning this matter	to the following.					
	Antonio L Roca						
		(Nume of Person)					
	Roca Gonzalez, PA						
		(Firm/Company)					
	2601 South Bayshore Dr	rive, Suite 600					
		(Address)					
	Miami, FL 33133						
		(City/State and Zip Code)					
For further information	concerning this matter, please o	all:	•				
Antonio L Roca		at ( <u>305</u> ) 859-6050					
(Name	of Person)	(Area Code & Daytime 1	'elephone Number)				
Enclosed is a check for t	the 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)				
Regist Divisi P.O. B	ING ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle				

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TO:

Registration Section

ISN96SBSN26:01

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OBSCRITO HORELINES A CORT CORT CO NHS

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

P Real Estate, LLC		
(Name of the Limited Liabilit (A Florida	y Company as it now appears on our recor Limited Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liability (	Company were filed on 10/23/2008	and assigned
Florida document number 1.08000099944	· <del>G</del>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and end with the wor"L.L.C."	nds "Limited Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD)	RESS)	<b>60</b>
	<del></del>	75
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
		<b> </b>
B. If amending the registered agent and/or registered agent and/or the new registered office add	tered office address on our records, <u>caress here</u> :	nter the name of the new
Name of New Registered Agent.		
New Registered Office Address:		
•	(Enter Florida str	eet address)
	, Flori	da
	(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)

Page 1 of 2

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 MCRM = Managing Member

Title	<u>Name</u>	Address	Type of Action
MGR	Ezio Piovezana	2601 South Bayshore Drive Suite 600 Miami, FL 33133	Add Z Remove
MGR .	Ezio Piovesana	c/o Roca Gonzalez, PA 2601 South Bayshore Drive, Suite 600 Miami, FL 33133	_■☑ Arld ■□ Remove
•			∧dd Remove
			Add Remove
<del></del>			Add Remove
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D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
<u></u>		· · · · · · · · · · · · · · · · · · ·	_
			<del></del>
Dated	Eno h	ruexma	
	Signature of a membe Ezio Piovesana	r or authorized representative of a member	<del></del>
	LZIO FIDVASAIIA	or printed name of signee	<del></del>

Page 2 of 2

Filing Fee: \$25.00