Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6393

From:

Account Name : STOLZENBERG, GELLES & FLYNN, LLP

Account Number: 120100000018 Phone

: (305)961-1450

Fax Number

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JAN 28 2015), BRUCE Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited		y as it now annears on our records.) ability Company)			
The Articles of Organization for this Limited Liability Company were filed on October 30, 2008 and assigned Florida document number L08000101878					
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liabil	ity company here:			
Structured Asset Ventures VI, LLC					
The new name must be distinguishable and end with the wo	ords "Limited Liabil	ity Company," the designation "LLC" or the	abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		3625 W. Broward Blvd.			
(Principal office address MUST BE A STREET		Second Floor			
		Ft. Lauderdale, FL 33312			
Enter new mailing address, if applicable:		3625 W. Broward Blvd.			
(Mailing address MAY BE A POST OFFICE B	ox)	Second Floor			
		Ft. Lauderdale, FL 33312			
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: Name of New Registered Agent: Stolzenberg, Gelles, Flynn & Arango, LLP					
New Registered Office Address: 1401 Bricke		l Avenue, STE 825	201 7AL		
		Enter Florida street address	59 2 7		
	Miami	, Florida <u>3</u>	3138 🗦 👤		
		City	Sp Code W		
New Registered Agent's Signature, if changing Re	gistored Agent:		79 2 M		
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 605, F.S. Or, if fulls 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. It amaging Registered Agent, Signature of New Registered Agent					
Page 1 of 3					

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(FAX)	P.003/004
	H150000187823

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	SAVYSKY, ANDREW M	3625 W. Broward Blvd.	
		Second Floor	□ Remove
		Ft. Lauderdale, FL 33312	
AMBR	ASSEFF, MICHAEL	3625 W. Broward Blvd.	□ Add
		Second Floor	□ Remove
	·	Ft. Lauderdale, FL 33312	
•			□ Remove
			A
			A L
			FI PROPERTY OF THE PROPERTY OF
			SIN Add S
		·	□ Remove
			
	·		Add
			Remove