L08000 100884

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SEURETARY OF STATE
ALLAHASSEE, FLORIDA

D. BRUCE

MAY 0 7 2012

EXAMINER

COVER LETTER

10:	Division of Corp				
SUBJECT: 715-801, LLC					
Name of Limited Liability Company					
		mendment and fee(s) are subdence concerning this matter	_		
FREDERIC BARTHE ESQ.					
Name of Person					
FREDERIC BARTHE P.A. Firm/Company				•	
	1 EAST BROWARD BLVD STE # 700		# 700		
FORT LAUDERDALE, FL 33301 City/State and Zip Code FMB@BARTH-LEIGH.COM					
				##	
				М	NEW T
		E-mail address: (to be used for future annual repor	t notification)	HAY -3
For fun	ther information cor	cerning this matter, please c	all:		in a
	FREDE	RIC BARTHE	at (954)	523 5555	OF STATE
	Name of I	Person		aytime Telephone Number	TATE DRIDA
Enclose	ed is a check for the	following amount:			.,
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	closed) Certified	e of Status &
	Registrat Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 ee, FL 32314	Registration S Division of C Clifton Build	orporations ing ve Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

715-80			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appear Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company Florida document numberL08000106884	were filed on	11/18/2008	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company her	<u>e</u> :	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compa	ny," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:	715 BAY SHO	DRE DRIVE #801	
(Principal office address MUST BE A STREET ADDRESS)	FORT LAUDE	RDALE, FL 3330	<u></u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PRE DRIVE #801E ERDALE, FL 33304	CKETARY OF S
		ORIDA	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ur records, <u>enter the</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:	Ent	er Florida street addre	ss
		, 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 Type of Action **Title** Name 1 Address MGR GUILBERT, CHRISTIAN 715 BAY SHORE DRIVE #801 Add Remove FORT LAUDERDALE, EL 33304 BARTHE, FREDERIC MGR 225 EAST SUNRISE BLVD, STE 602 ✓ Remove POMPNO BEACH, FL33304___ ☐ Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member FREDERIC BARTHE, ESQ.

Typed or printed name of signce
Page 2 of 2

Filing Fee: \$25.00