Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850) 617-6383

The state of the s

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)634-3694

Fax Number : (305)633-9696

\*\*Enter the email address for this business entity to be used for full annual report mailings. Enter only one email address please. \*\* m

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GIGA APPARTMENTS LLC

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8/31/2011

EMBIRE CORP KIT

## **COVER LETTER**

Divi	sion of Corporations			
SUBJECT:		APPARTMENTS LLC		
	Name	f Limited Lizbility Company		
The enclosed	Articles of Amendment and fee(s)	are submitted for filing.		
Please return	all correspondence concerning this	matter to the following:		
		MARIO GUZMAN		
		Name of Person		
		GUZMAN & GUZMAN, P.A.		
		Firm/Company		
	913(	9130 S. DADELAND BLVD. STE 1600		
		Address		
		MIAMI, FLORIDA 33156		
	<del></del>	City/State and Zip Code		
		ario@guzmanandguzman.com		
	E-mail add	tress: (to be used for future annual report notification)		
For further in	formation concerning this matter, p	sase call:		
	MARIO GUZMAN	er ( 305 ) 670-1991		
	Name of Person	at ( 305 ) 670-1991  Area Code & Daytime Telephone Number		
Enclosed is a	check for the following amount:			
<b>▼ \$25.00</b> Fil	ing Fee S30.00 Filing Fee Certificate of Sta			
	MAILING ADDRESS: Registration Scotion Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET/COURIER ADDRESS; Registration Section Division of Corporations Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301		

H 11000216135

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	FIL	Fr	)
11	AUG 31		
TALLA	RETARY OF	माम हिर्देश	8: 57
	"MASSEE,	FLO	A LE RIDA

			LURIDA
GIGA APPA	RTMENTS, LLC	et an one records \	
(Name of the Limited Linbilly Con (A Florida Limite	d Lisbility Company)	3 00 Out 1 Column	
The Articles of Organization for this Limited Liability Compa	any were filed on	01/26/2009	and assigned
Florida document number L09000007898			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited !	ighility company her	<u>e</u> :	
	TMENTS, LLC		
The new name must be distinguishable and end with the words "L"L.L.C."	imited Liability Compa	my," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:			
(Mulling address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered		ur records, <u>enter 1</u>	the name of the new
registered agent and/or the new registered office address b	<u>107e</u> :		
Name of New Registered Agent:			
New Registered Office Address:	Ent	ar Florida street ada	ress
	<u></u>		
	CIN	, Florida	7in Coda
			Zip Code
New Registered Agent's Signature, if changing Registered Age	<u>int:</u>		
I hereby accept the appointment as registered agent and a the provisions of all statutes relative to the proper and con accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offi company has been notified in writing of this change.	mplete performance i as provided for in Ch	of my duties, and I d apter 608, F.S. Or,	m familiar with and if this document is
TTC	hanging Registered Ages	at, Signature of New Re	eistered Agent

08/31/2071 03:30 302033000 EWBIKE COKB KIL 6VCE 03/04

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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:

MGRM =	Managing Member		
Title	<u>Name</u>	<u>Address</u>	Type of Action
<b>LEW</b> .			Add Remove
### <u> </u>			Add Remove
			Add Remove
			Add Remove
			Add Ramove
			Add Remove
D. If amend	ding any other information, enter chan	ige(s) here: (Attach additional sheets, if necessary,	AUG 31 CORETARY OF LLAHASSEE
Dated	AUGUST 31 , 2	011 Carfan (1)	AH 8: 57 FLORIDA
		er ogauthorized representative of a member	<del></del>
		d or printed name of signee	-
		Page 2 of 2	

Filing Fee: \$25.00

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MGR = Manager