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(Requestor's Name)			
(Address)	700157		
(Address)	700137		
(City/State/Zip/Phone #)			
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(Business Entity Name)	Section of the sectio		
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2009 JUN 30 AM 11: 07
SECRETARY OF STATE
TALL AHASSEE. FLORIDA

2009 JUN 30 AM 11: 07

T. CLINE

JUL - 1 2009

EXAMINER

COVER LETTER

TO: Registration S Division of Co					
SUBJECT:	MG Foray	Properties, LLC			
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Jose A. Muñoz			
		Name of Person			
MG Foray Properties, LLC					
Firm/Company					
7300 North Kendall Drive, Suite 400					
Address					
		Miami, Florida 33156			
		City/State and Zip Code		200 TAI	
jmunoz@mgforay.com E-mail address: (to be used for future annual report notification)				ECR LLA	-13
For further information	concerning this matter, please c		ion	2009 JUN 30 AM II: 07 SECRETARY OF STATE TALLAHASSEE. FHORID	
Sor	nia A. Martinez	at (305) 67	0-2350	E S	O
Name	of Person	Area Code & Daytime To	elephone Number	STATE STATE FHORIDA	
Enclosed 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 enclosed)	Certified C	of Status &	

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MG (<u>Name of the Limited Li</u> (A Fl	Foray Pro ability Compa orida Limited I	perties, LLC ny as it now appears Liability Company)	on our records.)		
The Articles of Organization for this Limited Liab Florida document number		were filed onN	March 25, 2009	and assigned	
This amendment is submitted to amend the follow	ing:				
A. If amending name, enter the new name of th	<u>ie limited liab</u>	ility company here:	:		
	N/A	\			
The new name must be distinguishable and end with t "L.L.C."	he words "Limi	ited Liability Company	y," the designation "L	LC" or the abbrevia	ition
Enter new principal offices address, if applicable:		N/A			
(Principal office address MUST BE A STREET ADDRESS)				SECRETARIA	<u> </u>
Enter new mailing address, if applicable:		N/A			
(Mailing address MAY BE A POST OFFICE BO	<u> </u>			STATE STATE	<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered offic			r records, <u>enter t</u>	he name of the	<u>new</u>
Name of New Registered Agent:	Jose A. Mui	ñoz			_
New Registered Office Address:	Kendall Drive, Si				
		Ente	r Florida street add	ress	
		Miami	, Florida	33156	_
		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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager

MGRM = Managing Member <u>Title</u> **Address Type of Action** <u>Name</u> MGR Sonia A. Martinez 7300 North Kendall Drive, Suite 400 ☐ Add Miami, Florida_33156___ ✓ Remove Jose A. Muñoz MGRM 7300 North Kendall Drive, Suite 400 ✓ Add Remove Miami, Florida 33156 ☐ Add ☐ Remove **Kom**nove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A June 23 Dated ___ Signature of a member or authorized representative of a member Jose A. Muñoz · Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00