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D. BRUCE

APR 28 2009

EXAMINER

COVER LETTER

Division of Coi	porations				
SUBJECT: ORLMA	AR II, LLC				
		ited Liability Company)			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
٤					
	John S. Bohatch, Esq.				
		(Name of Person)	· · ·		
	Guttenmacher & Bohatch	n, P.A.			
		(Firm/Company)			
	7301 SW 57th Court, Sui	ite 560		<i>.</i> .	
		(Address)		D	
	South Miami, Florida 331	43		CLAI D9 AI	
		(City/State and Zip Code)		ASA AS	
For further information of	concerning this matter, please c	all:	פרני דר	RY OF STATE	
John S. Bohatch		at (305) 666-1040	· R	≧ :ω	
(Name	of Person)	(Area Code & Dayt	ime Telephone Number)	ਸਾ ♣ਾ	
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy		□\$60.00 Filing Fee, Certificate of Status &	

MAILING ADDRESS:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ORLMAR II, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on March 25, 2009 and assigned Florida document number <u>L09000029356</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the ha registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) (City)

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 Title **Name Address** MGR ORLANDO J. BRIEVA ■7 Add 5011 SW 87TH AVENUE Remove MIAMI, FLORIDA 33165 ☐ Add Remove Remove Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated April 21, 2009 Signature of a member of authorized representative of a member JOHN S. BOHATCH/Authorized Representative Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00