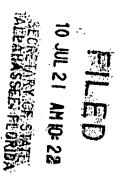
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Office Use Only



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D. BRUCE
JUL 22 2010
EXAMINER

## **COVER LETTER**

Registration Section

**Division of Corporations** Name of Limited Liability Company ne enclosed Articles of Amendment and fee(s) are submitted for filing. ase return all correspondence concerning this matter to the following: ROBERT DANIAL Name of Person Firm/Company 5151 COLLINS AVE, SUITE 1727 Address MIAMI BEACH, FL 33140 City/State and Zip Code RAM@MORGANREED.COM
E-mail address: (to be used for future annual report notification) rther information concerning this matter, please call: **ROBERT DANIAL** 867-8484 Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$30.00 Filing Fee & 00 Filing Fee \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

N	IR VERDE, LLC				
( <u>Name of the Limited Liab</u> (A Flor	ility Company as it now appea ida Limited Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability	ry Company were filed on	04/27/2009	and a	ssigne	d
Florida document numberL0900041442	2				
This amendment is submitted to amend the following	g:				
A. If amending name, enter the new name of the	limited liability company he	re:			
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Comp	any," the designation "L	LC" or the	e abbre	viation
Enter new principal offices address, if applicable:			<b>3</b> 34	<u> </u>	.· <u> </u>
(Principal office address MUST BE A STREET AL	DDRESS)			_\$_	
			- S	<u>N</u>	
Enter new mailing address, if applicable:	<u></u>			<b>À</b>	
(Mailing address MAY BE A POST OFFICE BOX)				<u> </u>	
B. If amending the registered agent and/or re	gistered office address on address here:	our records, enter t	he name	of the	e nev
		·			
Name of New Registered Agent:					<del></del>
New Registered Office Address:	F	nter Florida street add	nace		
	EA		. 633		
<del>-</del>	City	, Florida	Zip Co	de	

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 <u>Title</u> **Address** <u>Name</u> MGRM MORGAN REED GROUP 5151 COLLINS AVE. SUITE 1727 ☐ Add Remove MIAMI BEACH, FL 33140 **MGRM** ROBERT DANIAL 5151 COLLINS AVE. SUITE 1727 ✓ Add MIAMI BEACH, FL 33140 Remove ☐ Add Remove □Add Remove □Add Remove  $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 20 2010 Dated Signature of a member or authorized representative of a member Robert Danial Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00