

L090000643130

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EXAMINER



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DEPARTMENT OF REVENUE
DIVISION OF CORPORATIONS
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CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: Kim Weidenbach

DATE: 11/23/11

REF. #: RA4097.157811

CORP. NAME: TURNBERRY ASSET Managment, LLC changing its name to: TURNBERRY ASSET MANAGEMENT, LLC

↑
Client is adding "E" - Name was misspelled on Articles

- | | | |
|--|---|--|
| ☐ ARTICLES OF INCORPORATION | ☒ ARTICLES OF AMENDMENT | ☐ ARTICLES OF DISSOLUTION |
| ☐ ANNUAL REPORT | ☐ TRADEMARK/SERVICE MARK | ☐ FICTITIOUS NAME |
| ☐ FOREIGN QUALIFICATION | ☐ LIMITED PARTNERSHIP | ☐ LIMITED LIABILITY |
| ☐ REINSTATEMENT | ☐ MERGER | ☐ WITHDRAWAL |
| ☐ CERTIFICATE OF CANCELLATION | | |
| ☐ OTHER: | | |

STATE FEES PREPAID WITH CHECK# 542398 FOR \$ 60.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

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| ☐ CERTIFICATE OF STATUS | | |

Examiner's Initials

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV 23 AM 10:18

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV 23 AM 10:18

Turnberry Asset Management, 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 05/04/2009 and assigned
Florida document number L09000043130.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Turnberry Asset Management, LLC

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)

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 name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

, Florida

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PCOO</u>	<u>Phillp Goldfarb</u>	<u>19501 Biscayne Blvd.</u> <u>Suite 400</u> <u>Aventura, FL 33180</u>	☐ Add ☒ Remove
<u>SVCF</u>	<u>Robert Vollrath</u>	<u>19501 Biscayne Blvd.</u> <u>Suite 400</u> <u>Aventura, FL 33180</u>	☐ Add ☒ Remove
<u>VP</u>	<u>Jeffrey Mooallem</u>	<u>19501 Biscayne Blvd.</u> <u>Suite 400</u> <u>Aventura, FL 33180</u>	☐ Add ☒ Remove
<u>VP</u>	<u>Kenneth Klein</u>	<u>19501 Biscayne Blvd.</u> <u>Suite 400</u> <u>Aventura, FL 33180</u>	☒ Add ☐ Remove
<u>PCOO</u>	<u>Joseph Szymaszek</u>	<u>19501 Biscayne Blvd.</u> <u>Suite 400</u> <u>Aventura, FL 33180</u>	☒ Add ☐ Remove
<u>SVCF</u>	<u>Jacquelyn Soffer</u>	<u>19501 Biscayne Blvd.</u> <u>Suite 400</u> <u>Aventura, FL 33180</u>	☒ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated November 23, 2011

Signature of a member or authorized representative of a member

Jacquelyn Soffer

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

