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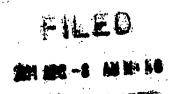
EXAMINER

.COVER LETTER

	on Section f Corporations				
SUBJECT:	BRICKELL BAY VENTURE 3607, LLC				
SUBJECT:	Name of Limited Liability Company				
The enclosed Articl	es of Amendment and fee(s) are submitted for filing.				
Please return all cor	respondence concerning this matter to the following:				
	YAMI MARTORY Name of Person				
	JORGE E. BLANCO, P.A. Firm/Company				
1401 PONCE DE LEON BOULEVARD, SUITE 202 Address					
	. Ida. C.S				
	CORAL GABLES, FLORIDA 33134				
	City/State and Zip Code				
	yami_blancolaw@yahoo.com E-mail address: (to be used for future annual report notification)				
For further informat	ion concerning this matter, please call:				
	YAMI MARTORY at (305) 444-0044				
Na	ame of Person Area Code & Daytime Telephone Number				
Enclosed is a check	for the following amount:				
\$25.00 Filing Fe	Solution for the second status and second filing fee & Solution for the second filing fee & Solution for the second filing fee & Solution for the second for the second filing fee & Solution for the second filing fee & Solution fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
Re Di P.	AILING ADDRESS: gistration Section vision of Corporations O. Box 6327 cllahassee, FL 32314 Control of Corporations Control of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRICKELL BAY VENTURE 3607, 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 __AUGUST 31, 2009 and assigned L09000083987 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent



MGR = Manager

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 **Type of Action** Title **Address** Name 1 AMPARO C. SILVA MGR 6610 NW 82ND AVENUE ☐ Add √ Remove MIAMI, FLORIDA 33166 **HELEN MEDINA** MGR **6610 NW 82ND AVENUE** ✓ Add Remove MIAMI, FLORIDA 33166 ☐ Add Remove Add Remove

> ∏Add ∏Remove

> ∏Add ∏Remove

lending any other	information, enter ch	ange(s) nere: (Att	ach additional sh	eets, if necessa
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Dated MARCH 24

2011

Signature of amember or authorized representative of a member

AMPARO C. SILVA

Typed or printed name of signee

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Filing Fee: \$25.00