



**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** TY Florida II LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alise Weinstein  
Name of Person

Alan J. Marcus, P.A.  
Firm/Company

20803 Biscayne Blvd., Suite 301  
Address

Aventura, FL 33180  
City/State and Zip Code

aweinstein@alanjmarcus.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alise Weinstein at (305) 937 1800  
Name of Person Area Code & Daytime Telephone Number

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)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**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

TY Florida II LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 OCT 11 AM 9:46

The Articles of Organization for this Limited Liability Company were filed on November 4, 2009 and assigned  
Florida document number LD9000106448.

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)*

20803 Biscayne Blvd.

Suite 301

Aventura FL 33180

Enter new mailing address, if applicable:

*(Mailing address MAY BE A POST OFFICE BOX)*

20803 Biscayne Blvd.

Suite 301

Aventura, FL 33180

**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:

Alan J. Marcus

New Registered Office Address:

20803 Biscayne Blvd. Suite 301

*Enter Florida street address*

Aventura

Florida

33180

*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.*

*Alan J. Marcus*  
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>
MGRM	Charles Yassky	424 Madison Avenue 8th Floor New York, NY 10017	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Hadria Lawner	20803 Biscayne Blvd. Suite 301 Aventura, FL 33180	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Ed Ticelli	424 Madison Avenue 8th Floor New York, NY 10017	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Ed Ticheli	20803 Biscayne Blvd. Suite 301 Aventura, FL 33180	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\* Managing Member Ed Ticheli's name and address need to be corrected. (as indicated above).

Dated September 21, 2010.

Signature of a member or authorized representative of a member

Ed Ticheli

typed or printed name of signee

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 10 OCT 11 AM 9:46