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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Santa Maria Three Seven Zero Two, 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:

Alfredo D. Xiques

Name of Person

Eduardo Jose Garcia, P.A.

Firm/Company

2950 SW 27th Avenue, Suite 300

Address

Miami, Florida 33133

City/State and Zip Code

axiques@rptgfla.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alfredo D. Xiques

Name of Person

at (305)

358-4800

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

Santa Maria Three Seven Zero Two, LLC

Page 1 of 2

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:

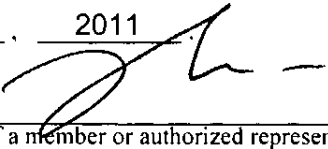
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MAURICIO TOLEDANO	1200 BRICKELL AVENUE, SUITE 500 MIAMI, FLORIDA 33131	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	ESTHER QUERUB	1200 Brickell Avenue, Suite 500 MIAMI, FLORIDA 33131	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	E. DAVID BENSADON	1200 Brickell Avenue, Suite 1700 MIAMI, FLORIDA 33131	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input 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.)*

Dated MARCH, 2011



Signature of a member or authorized representative of a member

DANIEL TOLEDANO, MANAGER

Typed or printed name of signee