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SECRETARY OF STATE ORIO

J. BRYAN

MAR - 9 2009

EXAMINER

COVER LETTER

	ration Secon of Corp				
SUBJECT:	MEM	OPHIS STRAND FLORIDA			
		Name of Limi	ted Liability Company		
The enclosed A	rticles of A	Amendment and fee(s) are sub	omitted for filing.		
Please return all	correspo	ndence concerning this matter	to the following:		
		RICHAR	D N. KRINZMAN, ESO		
			Name of Person		
		KRINZMAN	HUSS & LUBETSKY		
			Firm/Company	···	
		800 Br	ickell Avenue Suite 1501		
			Address		
		Miami,	Florida 33131		SECR
			City/State and Zip Code		ETA.
			khllaw.com		SSE SSE
For further infor	rmation co	e-mail address: (oncerning this matter, please o	to be used for future annual report notification call:	n)	TILED 10 MAR -8 PM 3: 53 SECRETARY OF STATE ALLAHASSEE, FLORID
		······, F			85 85 85
Rich		Krinzman, Esq	at (_305) 854-9700		
	Name of	Person	Area Code & Daytime Tele	ephone Number	
Enclosed is a ch	eck for th	e following amount:			
x \$25.00 Filin	g Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
	Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	s	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MEMPHIS STRAND FLOR						
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now app ted Liability Compan	oears on o y)	u <u>r rec</u> ords	<u>s.</u>)		
The Articles of Organization for this Limited Liability Comp	pany were filed on _	March	3, 201	0	and ass	signed
Florida document number <u>L10000023830</u>						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited	liability company l	<u>here</u> :				
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Cor	npany," th	ne designat	ion "LLC"	or the a	abbreviation
Enter new principal offices address, if applicable:	·			- FA 60		
(Principal office address MUST BE A STREET ADDRESS	<u>S)</u>			— EC	0 MAR	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				HASSEE. FLORID	-8 PH	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		n our re	cords, <u>en</u>	iter the i	<u>jame o</u>	of the nev
Name of New Registered Agent:						
New Registered Office Address:	<u> </u>	Futar Fla	orida stree	ot address		
		Enter r to				
	City		, Florid		ip 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 amending the Managers of 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>	Name	. <u>Address</u>	Type of Action
MGRM	MEMPHIS STRAND, INC.	c/o The Company RE 350 Sevilla Ave #103 Coral Gables, F1 33134, US	Add Remove
			Add Remove
			Add Remove
			Add Remove
	•		Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
D. If amen	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary	Bu
			FIL O MAR -8
	3/2/12	- F LORIDA	PH 3: 53
Dated	3 3 10 Digrature of a memb	er of authorized representative of a member	15ml
	And American Type	er of authorized representative of a member (a) [MAPA S Representative of a member of signee]	Therest LEC

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Filing Fee: \$25.00