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SECRETARY OF STATE

T. CLINE
DEC 19 2011
EXAMNER



December 13, 2011

Florida Dept of State **Division of Corporations** PO BOX 6327 Tallahassee, Florida 32314

Re: Smart Growth Realty, LLC / Manager addition

To whom it may concern:

Enclosed is the required paperwork for the addition of Giselle B. del Amo as a manager to Smart Growth Realty, LLC with a check in the amount of \$ 30.00 as per your request.

Please try to rush the changes before year end if possible. If you have any questions that need attention you may contact me at 786-269-3247 or Carlos@Carlosdelamo.com.

Your time is greatly appreciated in this matter.

Cordiall

Carlos L del Amo, President Smart Growth Realty, LLC.

3211 Ponce De Leon Blvd., Suite 200, Coral Gables, FL 33134 Office: 800-226-9304, Fax: 305-424-9324, www.SmartGrowthRealty.com

COVER LETTER

TO: Registration S Division of Co					
SUBJECT: Sm	nort Growth Real	ly, LLC			
-		ited Liability Company			
	Amendment and fee(s) are su ondence concerning this matte	_			
	Smart Gro	with Realty, LLC		7 2 2 E	
	3211 Ponce	Wh Realty, LLC Firm/Company De Leon Blvp. Surte Address	200	2011 DEC 16 SECKETARY O	
		oles, FL 33134 City/State and Zip Code		6 PH 1: 98 RY OF STATE SEE, FLORID!	\$ 1 \$ 7
	Carlos @ E-mail address: (carlos Delamo. Com-	ation)	7>	
For further information of	concerning this matter, please of	•	,		
Cubs Name o	L. Del amo	at (<u>186</u>) <u>269 - 3</u> Area Code & Daytime T	247 Telephone Number	_	
Enclosed is a check for t	he 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 For Certificate of Certified Copy (additional copy)	Status &	

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

	ry, LLC	
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on Limited Liability Company)	our records.
The Articles of Organization for this Limited Liability C	ompany were filed on	h 5,2010 and assigned
Florida document number L 100000 25181	-	•
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	-
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	PESS)	
		THE CONTRACTOR OF THE CONTRACT
Enter new mailing address, if applicable:		ARY SSE
(Mailing address MAY BE A POST OFFICE BOX)		
		5H *
B. If amending the registered agent and/or regist	ered office address on our	records, enter the name of the new
registered agent and/or the new registered office addi	ress here:	
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter F	lorida street address
		, Florida
	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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager

MGRM = Managing Member Title Name Address Type of Action Giselle B. Del Amo Ponce de Leon BVD. MGR **⊠** Add Remove ☐ Add Remove Add Remove □Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 12/13/2011 Dated ___ Signature of a member or authorized representative of a member Carlos L. Del Amo Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00