

L10000028896

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H10000241049 3))



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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TT II 2804, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED

10 NOV -5 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 NOV -5 AM 11:01

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DIVISION OF CORPORATIONS

Electronic Filing Menu Corporate Filing Menu

T. HAMPTON

NOV - 8-2010

EXAMINER



November 5, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

TT II 2804, LLC
TURNBERRY PLAZA SUITE 801
2875 N.E. 191ST STREET
AVENTURA, FL 33180

SUBJECT: TT II 2804, LLC
REF: L10000028896

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Our records indicate the current name of the entity is as it appears listed above. Please correct the name throughout the document.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II

FAX Aud. #: H10000241049
Letter Number: 710A00026048

P.O BOX 6327 - Tallahassee, Florida 32314

3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H10000241049

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 NOV -5 AM 11:31

TT II 2804, 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 FLORIDA and assigned
Florida document number L10000028896

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 office address, if applicable: 2600 ISLAND BLVD
(Principal office address MUST BE A STREET ADDRESS) APT # 705
AVENTURA, FL 33160

Enter new mailing address, if applicable: 2600 ISLAND BLVD
(Mailing address MAY BE A POST OFFICE BOX) APT # 705
AVENTURA, FL 33160

B. If amending the registered agent and/or registered office address on our records, enter the names of the new
registered agent and/or the new registered office address here:

Name of New Registered Agent: EDGAR D HALAC

New Registered Office Address: 2600 ISLAND BLVD, APT # 705

Enter Florida street address

AVENTURA, Florida 33160

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, thereby confirm that the limited liability
company has been notified in writing of this change

Edgar Halac
If Changing Registered Agent, Signature of New Registered Agent

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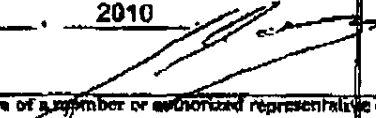
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	AIDENBAUM, CLAUDIA M	2600 ISLAND BLVD APT # 705 AVENTURA, FL 33180	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	HALAC, EDGAR D	2600 ISLAND BLVD APT # 705 AVENTURA, FL 33160	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	HALAC, LEON J	2600 ISLAND BLVD APT # 705 AVENTURA, FL 33160	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated NOVEMBER 4 2010



 Signature of a member or authorized representative of a member

 DEAR HALAC

 Typed or printed name of signer

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