L10000035591

(Re	equestor's Name)				
(Ad	ldress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
		A			

Office Use Only

B. KOHR

APR 1 6 2012

EXAMINER



500226979785

04/12/12--01027--004 **25.00

DIVISION OF CORPORATION
12 APR 12 PM 4: 50

COVER LETTER

	Division of Cor			
SUBJECT	Γ:		ATE MANAGEMENT, L	LC
		Name of Lim	nited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please retu	ırn all correspo	ndence concerning this matte	er to the following:	
		1	BIANCA SAPORITTO	
			Name of Person	2 N
		TEAM REA	L ESTATE MANAGEMENT	LLC LOOR
			Firm/Company	
		2801 NE 208	TH TERRACE, SECOND F	LOOR =
			Address	LOOR 5
		A	VENTURA, FL 33180	
			City/State and Zip Code	
		BIANCA@	TEAMREMANAGEMENT.C (to be used for future annual report notifi	OM cation)
For further	information c	oncerning this matter, please		canony
	DIANO	A SABORITTO	205	014 4045
Name of Person			at (<u>305)</u> Area Code & Daytime	914-4845 Telephone Number
Enclosed is	s a check for th	e following amount:		
		\$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)
	Registra Division P.O. Bo	NG ADDRESS: ation Section to of Corporations to 6327 ssee, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cerutallahassee, FL 323	n utions nter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	V Company as it now annea		
(Name of the Limited Liability (A Florida	Limited Liability Company)	13 On Our Tocords)	
The Articles of Organization for this Limited Liability C	Company were filed on	04/01/2010	and assigned
This amendment is submitted to amend the following:	ited liability company be	***	12 APR 12
A. If amending name, enter the new name of the lim	птен паршту сотрану не	<u>re</u> :	7
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Comp	any," the designation "l	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDI	RESS)		
		<u> </u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		our records, <u>enter t</u>	he name of the ne
Name of New Registered Agent:			
New Registered Office Address:			
	Er	nter Florida street add	ress
		, 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 Type of Action **Address** <u>Title</u> <u>Name</u> FINKELBERG, CHRISTIAN **MGRM** 2801 NE 208TH TERRACE ✓ Add SECOND FLOOR Remove AVENTURA, FL 33180 ☐ Add Remove Remove Add Remove □Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) APRIL 9 2012 Dated _____ Signature of a member or authorized representative of a member **BIANCA SAPORITTO** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00