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C. LEWIS

JUN 2 5 2010

EXAMINER

COVER LETTER

TOs Registration Section Division of Corporations
SUBJECT: New TUS Cany Part News, LKE 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:
Stephen Grant
Quattro Real Estate, LLC
ZOO SE 15th Rd, Suite 17A
Miami, FL 3329 City/Stafe and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Stephen Grant at 305 69-1364 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} S10.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Opy (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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

New The	s cury	Pa	xthe	SIL	LC	
(<u>Name of the Limited Liabi</u> (A Florid	lity Company : la Limited Liab	as it now app oility Compan	oears on our re	cords/)		
The Articles of Organization for this Limited Liability	y Company we	ere filed on _	4/06	J2010	and assign	ed
Florida document number <u>L</u> 0000 37	-176			·		
This amendment is submitted to amend the following	:					
A. If amending name, enter the new name of the li	imited liabilit	y company	<u>here</u> :			
The new name must be distinguishable and end with the v "L.L.C."	words "Limited	Liability Cor	mpany," the des	ignation "LL	C" or the abbr	eviation
Enter new principal offices address, if applicable:	_				<u> </u>	
(Principal office address MUST BE A STREET AD	DRESS)			7		
Enter new mailing address, if applicable:	_			7	24 PA	tro
(Mailing address MAY BE A POST OFFICE BOX)	-				LOST E	
	-				<u> </u>	
B. If amending the registered agent and/or regregistered agent and/or the new registered office ac		e address o	n our record	s, <u>enter the</u>	name of the	<u>1e new</u>
Name of New Registered Agent:	Quat	40	Real	Esta	ite, L	.LC
New Registered Office Address:	200_	SE	15 th Enter Florida	Rd street addre	Suite	17A
	Miay	Mj City		lorida	33\2 Zip Code	9
		•			•	

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** Address Type of Action <u>Name</u> ☐ Add Remove □ Add X Add □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2010 Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00