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EXAMINER



200183607742

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COVER LETTER

TO: Registration : Division of Co			
SUBJECT:		ty Partners Dev., ted Liability Company	LLC
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	1	Lisette Salazar, Esq.	
		Name of Person	
•	Lisette Pie Salazar PA		
•		Firm/Company	
	200	Crandon Blvd. Suite	311
		Address	
	Ke	ey Biscayne, Fl. 3314	9
City/State and Zip Code			- A - 10 - A
<u></u>		salazarlaw@aol.com	1
For further information	concerning this matter, please c		on nonneadon)
Ļ	isette Salazar	at (305)	361-6161
Name	of Person	Area Code &	Daytime Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is a	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAI	LINC ADDDESS.	QTDFFT/	COUDIED ADDRESS.

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

Montere (Name of the Limited L.	y Realty Pa lability Compar lorida Limited L	artners Dev., y as it now appea iability Company)	LLC			
The Articles of Organization for this Limited Liab	• • •	were filed on	05/06/2010	and assi	gned	
Florida document numberL100000495	510	en e				
This amendment is submitted to amend the follow	ving:	· ·				
A. If amending name, enter the new name of t	he limited liab	lity company her	; :2: .			
	- , ,	, 1 (a)	. !			
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ted Liability Compa	my," the designation '	'LLC" or the a	bbreviati	
Enter new principal offices address, if applical	ter new principal offices address, if applicable: C/O Lisette		ie Salazar PA			
(Principal office address MUST BE A STREET ADDRESS)		200 Crandon	Blvd. Suite 311			
		Key Biscayne	e, Florida 33149	72.0	,Ī	
			-	O A		
Enter new mailing address, if applicable:	,	C/O Lisette P	ie Salazar PA	ALIA ALIA	à .	
Mailing address MAY BE A POST OFFICE B	<u>0x)</u>	200 Crandon	Blvd. Suite 311	经	- Hawain	
*		Key Biscayne	e, Florida 33149	연의 곳	[7]	
B. If amending the registered agent and/or	registered off	ice address on o	our records, enter	the name of	C) the ne	
registered agent and/or the new registered offic				المالية المالية		
Name of New Registered Agent:	Lisette Salaz	zar, Esq.				
New Positional Office Address	200 Crandor	n Blvd. Suite 3	11			
New Registered Office Address:	Enter Florida street address			dress		
	The state of the s		. Florida	33149		
		City , Florida _			· Zip Code	
		-		- ,		

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, 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	Address	Type of Action			
mgr	Tasca, Richard R.	1000 5th Street, Suite 603 Miami Beach, FL 33139	☐ Add ☑ Remove			
mgr	Apter, Jeffrey T.	200 Crandon Blvd. Suite 311 Key Biscavne, Florida 33149	Add Remove			
•	· · · · · · · · · · · · · · · · · · ·		Add Remove			
ing the second s	<u>;</u>		Add Remove			
<u> 1</u>			Add Remove			
			Add Remove			
D. If amendi	<u> </u>	r change(s) here: (Attach additional sheets, if necessary.,				
Dated	July 22	2010	: . .			
-	Signature of a	member or authorized representative of a member Richard R. Tasca Typed or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00