## L10000 067887

(	Requestor's Name)	
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	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	Business Entity Name)	• • • • • • • • • • • • • • • • • • • •
. (	Document Number)	
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J. BRYAN
NOV 2 9 2010

EXAMINER

## **COVER LETTER**

, TQ:		ection porations		
SUBJECT:		3910 \	/ICEROY LLC	
SUBJECT:			ited Liability Company	_
The enclosed Ar	ticles of	Amendment and fee(s) are su	omitted for filing.	
Please return all	correspo	ondence concerning this matter	to the following:	
		<del> </del>	JUAN C. ACOSTA Name of Person	
			Name of Ferson	<u></u> -
			ISKANDER INC.	_ PEC = T
			Firm/Company	200
	201 S BISCAYNE BLVD 28TH FLOOR		10 HOV 24 AM 11: 47 SECRETARY OF STATE TALLAHASSEE, FLORID	
			Address	
			MIAMI, FL 33131	93 <b>5</b>
•			City/State and Zip Code	- Fra
			osta@iskander-inc.com	_
For further inform	mation c	e-mail address: (	to be used for future annual report notification)	
		an C. Acosta	at (_305 ) 433-7295	
	Name o	f Person	Area Code & Daytime Telephone Num	nber
Enclosed is a che	eck for th	ne following amount:		
<b>✓</b> \$25.00 Filing	Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	Filing Fee, ficate of Status & ficd Copy fional copy is enclosed)
	Registr Divisio P.O. Bo	ation Section n of Corporations ox 6327 ssee, 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

(No. of Ab. 1 Sura Jan J	3910 VICE	ROY LLC		·	
( <u>Name of the Limited</u> (A	Florida Limited L	ny as it now appear. Liability Company)	s on our records.)		
The Articles of Organization for this Limited Li Florida document number		were filed on	6/25/2010	and assigned  SECRETARY OF STA	
This amendment is submitted to amend the follo	_			N24 P	
A. If amending name, enter the new name of	the limited liab	ility company here	2:		
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ted Liability Compar	ny," the designation "	LLC" or his abbievation	
Enter new principal offices address, if applicable:		485 BRICKEL	L AVE.		
(Principal office address MUST BE A STREE	T ADDRESS)	UNIT 2501			
		MIAMI, FL 33	131	<del></del>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		485 BRICKEL UNIT 2501 MIAMI, FL 33			
B. If amending the registered agent and/oregistered agent and/or the new registered of			ur records, <u>enter</u>	the name of the new	
Name of New Registered Agent:	ISKANDER	INC.			
New Registered Office Address:					
		Ente	er Florida street add	dress	
		MIAMI	, Florida	33131	
		City		Zip Code	
Now Designated Assetts Claustone if showeing D	lantatawall & mauta				

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

Page 1 of 2

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	GUSTAVO GAMBINO	785 CRANDON BLVD #201 KEY BISCAYNE, FL 33149	Add  Remove	
MGR	ISKANDER INC.	201 S BISCAYNE BLVD 28TH FLOOR MIAMI, FL 33131		
MGR	JUAN C. ACOSTA	201 S BISCAYNE BLVD 28TH ELOOR MIAMI, EL 33131	AddRemove	
			Add Remove	
			Add Remove	
<del></del>			Add	
D. If an	nending any other information, enter o	change(s) here: (Attach additional sheets, if necessa	ary.)	
	NEW ADDRESS OF MGRM (JA	AP CORPORATION CV):		
	485 BRICKELL AVE, UNIT 2501	I, MIAMI, FL 33131	10 NOV 24 AM SECRETARY OF FALLAHASSEE, F	
Dated	NOVEMBER 19	2010	AM II: 48 OF STATE E. FLORID	
	Signature of a m	ember or authorized representative of a member GRAHAM DUNN	T>	
Typed or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00