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| (Re | questor's Name) | | | |
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| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Na | me) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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SEREWAY OF STATE

SHANNASSEE: FLORIDA

J. BRYAN

SEP 27 2011

EXAMINER

September 22, 2011

Florida Department of State Division of Corporations

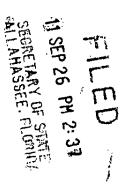
RE: Adding a Manager to an existing corporation

To Whom It May Concern:

Attached please find the form to add a new manager to an existing corporation. If you have any questions, please contact me anytime.

Thank you,

Lilian Jochem 561-308-8832



COVER LETTER

| 10: | Division of Co | | | |
|--------------|--------------------------------|---|--|--|
| SUBJE | CT: | Real Capi | tal Partners, LLC | |
| | | | ited Liability Company | |
| The end | closed Articles of | Amendment and fee(s) are sul | omitted for filing. | |
| Please : | return all corresp | ondence concerning this matte | r to the following: | |
| | | | Alfredo D. Xiques | alternative description and the second |
| | | | Name of Person | illian illi |
| . Edu | | | uardo Jose Garcia, P.A. | |
| Firm/Company | | | Firm/Company | F. 20 [|
| | 2950 SW 27th Avenue, Suite 300 | | | SEP 26 PM 2: 33 |
| | | | Address | نى _{ئى} رىتى |
| | | | Miami, Florida 33133 | |
| | | | City/State and Zip Code | |
| | | E-mail address: (| axiques@rptgfla.com to be used for future annual report notifica | tion) |
| For fur | ther information | concerning this matter, please of | call: | |
| | | edo D. Xiques | at (305) 3 | 58-4800 |
| | rvame (| or reison | Area Code & Daytine | ecephone rumber |
| Enclose | ed is a check for t | he following amount: | | |
| ₹ 25 | .00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Regist Divisio P.O. B | ING ADDRESS: ration Section on of Corporations fox 6327 assee, FL 32314 | STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230 | ions er Circle |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

| TO |) | | |
|--|--|---------------------------|---------------------------|
| ARTICLES OF O | RGANIZAT | ION | 200 Fr 1971 |
| O | F | | |
| | | | and assigned |
| Real Capital P | artners, LLC | | |
| (Name of the Limited Liability Compar (A Florida Limited L | ny as it now appea liability Company) | rs on our records.) | Fig. 7 |
| · | | | المن المناسبة |
| The Articles of Organization for this Limited Liability Company | were filed on | 06/30/2010 | and assigned |
| Florida document numberL10000069808 | | | |
| This amendment is submitted to amend the following: | | | |
| This amendment is submitted to amend the following. | | | |
| A. If amending name, enter the new name of the limited liab | ility company hei | <u>:e</u> : | |
| | | | |
| The new name must be distinguishable and end with the words "Limit "L.L.C." | ted Liability Compa | any," the designation | "LLC" or the abbreviation |
| Enter new principal offices address, if applicable: | 2950 SW 27 | AVE #300 | |
| (Principal office address MUST BE A STREET ADDRESS) | Miami, FL 33 | 133 | |
| | | | |
| Enter new mailing address, if applicable: | <u></u> | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | |
| | | | |
| | | | |
| B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here | | our records, <u>enter</u> | the name of the new |
| | | | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| Enter Florida street address | | | |
| | | . Florida | |
| and the state of t | City | , 1 1011000 , | 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, 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 | Otto Travieso | 2950 SW 27th Avenue, Suite 300 Miami, Florida 33133 | Add Remove |
| | we do to the state of the state | | Add Remove |
| | | | Add Remove |
| ······································ | | | Add Remove |
| | | | Add Remove |
| | | | AddRemove |
| D. Ifamen | ding any other information, enter c | hange(s) here: (Attach additional sheets, if necessary | <i>ı</i> ,) |
| | | | A SEP 26 PM 2: 37 |
| Dated | September 20 | 2011 . | |
| | - Uff | Chem | ~ <u></u> |
| | · · | ember or authorized representative of a member ilian Jochem, Manager | |
| | <u> </u> | yped or printed name of signce | |

Page 2 of 2

Filing Fee: \$25.00