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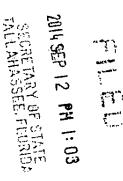
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## COVER LETTER

TO:

	Corporations	407.07.544.11.0	
SUBJECT:		167 ST-F11, LLC nited Liability Company	<u> </u>
		······	
The enclosed Articles	s of Amendment and fee(s) are sa	abmitted for filing.	
Please return all corre	espondence concerning this matte	er to the following:	
	Carmen Fanego		<u>.                                    </u>
	Name of Person		201 S
	TotalBank		LEAN SA
	Firm/Company		17.55 T
	100 SE 2nd Street, 32nd Floor		SE 0 38
		Address	PM 1: 03 SEEL FLORIDA
		Miami, FL 33131	<b>高高 8</b>
		City/State and Zip Code	
	E-mail address:	anego@totalbank.com (to be used for future annual report notification)	
For further information	on concerning this matter, please		
(	Carmen Fanego	at ( 305 ) 476-6269	9
	ne of Person	Area Code & Daytime Telephone	
	or the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Cadditional copy is enclosed) C	0.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed
M.A	ILING ADDRESS:	STREET/COURIER ADDRI	ESS:
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

6157 NW	167 ST-F11, LLC	;		
( <u>Name of the Limited Liability C</u> (A Florida Lir	Company as it now appea	rs on our records.)		
	<b></b>			
The Articles of Organization for this Limited Liability Cor	npany were filed on	07/14/2010	and assigned	
Florida document numberL10000074161				
This amendment is submitted to amend the following:			,	
_			7201 FASS	
A. If amending name, enter the new name of the limite	d liability company he	<u>re</u> :	ECR SE	
			至 4	
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Compa	any," the designation "l	LC or the abbreviation	
			ma z	
Enter new principal offices address, if applicable:		Street, 32nd Floor	<u> </u>	
(Principal office address MUST BE A STREET ADDRE	<u>ss)</u> <u>Miami, FL 3</u>	3131	<u> 공작</u> :	
			77	
Enter new mailing address, if applicable:	100 SE 2nd	Street, 32nd Floor	· · · · · · · · · · · · · · · · · · ·	
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 3	Miami, FL 33131		
,				
B. If amending the registered agent and/or register		our records, <u>enter (</u>	the name of the new	
registered agent and/or the new registered office address	ss nere:			
N. C.V. D. L. L.				
Name of New Registered Agent:				
New Registered Office Address: 100 SE	2nd Street, 32nd F		•	
	Enter Florida street address			
	Miami	, Florida	33131	
	City		Zip Code	
Naw Pagistared Agent's Signature if changing Pagistared	Aganti			

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 60& 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 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>:

	Manager i = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			- 20 A
			Reflove 12 Adds 12 Adds 14 Adds 15 Add
			Remove C
			Add Remove
			Add Remove
D. If an	nending any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	<u> </u>
	100 SE 2nd Street, 32nd Floor		<del></del>
	Miami, FL 33131		
Dated	August 12	2014 .	
	Signature of a	MANUAL TO AUTHORIZED REPRESENTATIVE OF A MEMber	
		Carmen Fanego  Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00