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TALLAHASSEE, FLORIDA

A. JEFFREY BARASH, P.A.

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TEL: (305) 868-7800
FAX: (305) 866-4276

A. JEFFREY BARASH, Esq.

PAMELA BARASH SCHATTEN, Esq.

A MEMBER OF THE BARS OF:
FLORIDA & NEW YORK

February 1, 2017

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: SouthMaple Tree Real Estate, LLC
Amend Articles of Organization

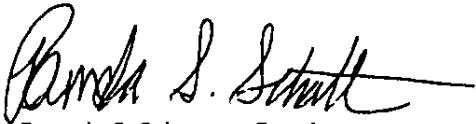
Dear Sir/Madam:

Please find enclosed the form to amend the Articles of Organization for SouthMaple Tree Real Estate, LLC.

Also, enclosed is sixty (\$60.00) dollars for the filing fee, certificate of status and certified copy (additional copy is enclosed), with a self-addressed envelope for the return of the documents.

If you have any questions, I can be reached at (305) 868-7800.

Very truly yours,



Pamela S. Schatten, Esquire

For the Firm

Enclosures.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SouthMaple Tree Real Estate, LLC

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:

Pamela Schatten, Esquire

Name of Person

A. Jeffrey Barash, P.A.

Firm/Company

1140 Kane Concourse - 4th Floor

Address

Bay Harbor Islands, Florida 33154

City/State and Zip Code

Pambarash@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pamela Schatten, Esquire

305 868-7800
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(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**

SouthMaple Tree Real Estate, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/09/2010 and assigned
Florida document number L10000083595.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
City 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Eitan Raviv	5708 Park Road	<input type="checkbox"/> Add
		Fort Lauderdale, FL 33312	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tsvi Raviv	Snapir 1	<input checked="" type="checkbox"/> Add
		Yavne, Israel 8155208	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Alana Raviv-Behar	37 Aegis Drive, Maple	<input checked="" type="checkbox"/> Add
		Ontario, Canada LGA4M5	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Alexander Raviv	Hubelrain 23	<input checked="" type="checkbox"/> Add
		Luzern, Switzerland 6005	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

17 FEB - 6 AM 7:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated January 2017

Signature of a member or authorized representative of a member

Managing Member

Typed or printed name of signee