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EXAMINER



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COVER LETTER

TO:

TO:	Registration Se Division of Cor				
SUBJECT: 7928 WE		ST DR #609 LLC			
CODE		Name of Lim	ited Liability Company		
The end	closed Articles of	Amendment and fee(s) are su	bmitted for filing.		<i>–</i> 3
Please 1	return all correspo	indence concerning this matte	r to the following:		1 JUL-6 AM 9: 30
		J	oseph B. Ryan III, Esq		6-9
			Name of Person		至
JC		SEPH B. RYAN III, P.	٩.	بب نین	
			Firm/Company		0
		2701 8	S. Bayshore Drive, Sui	te 402	
			Address		
•			MIAMI, FL 33133		
			City/State and Zip Code		
		E-mail address:	berisimus@aol.com	ort notification)	
For furt	ther information co	oncerning this matter, please	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		B. RYAN III, ESQ.	at (305)	444-4949	
	Name of	Person	Area Code &	Daytime Telephone Number	
Enclose	ed is a check for th	e following amount:			
√ \$25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is er	S60.00 Filing Fee, Certificate of Stat closed) Certified Copy (additional copy i	
	Registra Divisio P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	Registration Division of Clifton Buil	Corporations	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	28 WEST DR #609 LLC *		
(<u>Name of the Limited Li</u> (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	3 90%	
*Now known as 36 The Articles of Organization for this Limited Liab	657-59 SW 23 TERRACE LLC 10/13/2010	and assigned	
Florida document numberL100001069			
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of the	he limited liability company here:		
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company," the designation "	LLC" or the abbreviation	
Enter new principal offices address, if applicab	ole:		
(Principal office address MUST BE A STREET)	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u> </u>		
		75750	
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, enter	the name of the new	
Name of New Registered Agent:	<u> </u>		
New Registered Office Address:		_	
	Enter Florida street address		
<u>-</u>	, 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 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 Type of Action Title <u>Name</u> <u>Address</u> Charles Zini MGRM 2701 S. BAYSHORE DR., SUITE 402 **∇** Remove MIAMI, FL 33133 Samir Jaieb MGMR Remove MIAMI_FL_33133____ ☐ Add Remove ☐ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2011 ignature of a member or authorized representative of a member 2701 S. Bayshore Drive

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee