## L10000110117

(Re	equestor's Name)	)			
(Ad	dress)				
(Ad	dress)	'			
(Cit	y/State/Zip/Phon	ne #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Na	me)			
(Document Number)					
Certified Copies	_ Certificate	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



500211766695

09/06/11--01016--014 \*\*55.00

2011 SEP -6 RM 2: 55

C. LEWIS

SEP -7 2011

EXAMINER

## **COVER LETTER**

TO:	Registration So Division of Cor						
SUBJE	SUBJECT: GRAND AVENUE PROPERTY, LLC						
50201			ited Liability Company		<del></del>		
The en	closed Articles of	Amendment and fee(s) are sul	bmitted for filing.				
Please	return all correspo	ndence concerning this matter	r to the following:				
		JO	JORGE E. OTERO, ESQ.  Name of Person				
			Name of Ferson				
OTER			RO & ASSOCIATES,	P.A.			
			Firm/Company				
75 VALENCIA AVENUE, SECOND FLOOR							
			Address				
		CORAL	. GABLES, FLORIDA	33134			
	City/State and Zip Code						
		JE0	O@OTEROLAW.COI to be used for future annual rep	Ort notification)			
For fur	ther information c	oncerning this matter, please c		,			
	JORGE	E. OTERO, ESQ.	at ( 305 )	567-9	9000		
	Name o	f Person		Daytime Teleph	one 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 e		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Registra Divisio P.O. Bo	NG ADDRESS: ation Section of Corporations ox 6327 ssee, FL 32314	Registratior Division of Clifton Buil	Corporations Iding Itive Center Cir			

FILEU

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2011 SEP - G PM 2: 55

SECRETARY OF STATE TALLAHASSEE. FLORIDA

GRAND	<b>AVENUE PROPERTY</b>	′, LLC			
(Name of the Limited L (A F	iability Company as it now appe lorida Limited Liability Company	ars on our records.)			
The Articles of Organization for this Limited Liab	pility Company were filed on	10/21/2010	and assigned		
Florida document numberL100001101	17				
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liability company he	ere:			
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Comp	pany," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if applicab	ole:	<u> </u>			
(Principal office address MUST BE A STREET	ADDRESS)				
Enter new mailing address, if applicable:	<u></u>				
(Mailing address MAY BE A POST OFFICE BO	<u> </u>		•		
B. If amending the registered agent and/or registered agent and/or the new registered offic		our records, enter the	he name of the ne		
Name of New Registered Agent:					
New Registered Office Address:		nter Florida street addr			
	Emer Fiorau street unaress				
	City	, Florida	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 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 TARASOV, VADIM 75 VALENCIA AVENUE, 2ND FLOOR CORAL GABLES FL 33134 Remove MGR TARASOVA, ELENA 75 VALENCIA AVENUE, 2ND FLOOR √ Remove CORAL GABLES EL 331340. MGR OTERO, JORGE E. OTERO & ASSOCIATES, P.A. ✓ Add 75 VALENCIA AVENUE, 2ND FLOOR ☐ Remove **CORAL GABLES FL 33134** □Add Remove  $\square$ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 201 Dated\_ Signature of a/member or authorized representative of a member ONERO SORGE Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00