610000/16/54

	(Requestor's Name)						
	(Address)						
	(Address)						
	(City/State/Zip/Phone #)						
PICK-UF	P WAIT	MAIL					
- "	(Business Entity Name)						
(Document Number)							
Certified Copies	Certificates of S	Status					

Special Instructions to Filing Officer:

A. LUNT

FEB -1 2010

EXAMINER

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COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT:	BANYAN VI	ILAS LLC		
SUBJECT:		ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	bmitted for filing.		
Please return all correspon	ndence concerning this matter	r to the following:		
	ODED YEOSH	ouA		
		Name of Person		
	GLOBAL HORI	ZONS GROUP LLC	SECRETARY OF STATE TALLAHASSEE, FLORID	one and the second
		- 1		
	3301 NE 1	St AVE #2610	ART SST	2
		Address		
	MIAMI, FL	City/State and Zip Code	FLORI	
				D
	ODED@GLOBAL	HORIZONSGROUP. COM to be used for future annual report notification		
For Evaluation and	·	•	on)	
For further information co	oncerning this matter, please of	call:	•	
ODED YEOS	HOVA	a1 954) 655 - 355	51	
Name of	Person	Area Code & Daytime Te		
Enclosed 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 enclosed)	\$60.00 Filing Fee, Certificate of State Certified Copy (additional copy is	
Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssce, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BANYAN U	ILAS	466			
(Name of the Limited Liability (A Florida			,		•
The Articles of Organization for this Limited Liability C Florida document number <u>L/00001/6/5</u> 4	Company wer	e filed on	108/2	0/0 and	assigned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lim	ited liability	company here:			
The new name must be distinguishable and end with the wo	rds "Limited L	iability Company	," the designation	on "LLC" or th	ne abbreviation
Enter new principal offices address, if applicable:		····		SECO	
(Principal office address MUST BE A STREET ADD)	<u>ESS)</u>			FO 3	
				SS S	
				मान ज	
Enter new mailing address, if applicable:					<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	_			22. 19.00	<u> </u>
B. If amending the registered agent and/or regis registered agent and/or the new registered office add	tered office ress here:	address on our	r records, ent	er the name	e of the new
Name of New Registered Agent:	·····				
New Registered Office Address:		Enter	r Florida street	address	
		3.00			
	Ci	tv	, Florida	Zip C	ode .

New Registered Agent's Signature, if changing Registered Agent:

1

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 Title Name | **Address** Type of Action ☐ Add Remove ∏ Add Remove ∏ Add Remove ĨĀdd Remove **Q**Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Please corect the LLC name "L" In our missing Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00