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COVER LETTER

TO: Registration Division of C	n Section Corporations		
SUBJECT:	MOTIO	NBRICKS, LLC	
	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are su	ubmitted for filing.	
Please return all corre	spondence concerning this matte	er to the following:	
	R	OSANA FIJALKOWSKY	
		Name of Person	
	TEAM REA	AL ESTATE MANAGEMENT LL	.C
		Firm/Company	71. 2
2801 NE 208 TERRACE, SECOND FLOOR		2113 NEV	
	Address		
	,	AVENTURA, 33180 FL	SS -5
		City/State and Zip Code	
•	ROSANA@	TEAMREMANAGEMENT.CO	M SPECIAL SECTION OF S
For further information	E-mail address: on concerning this matter, please	(to be used for future annual report notification	on) In
	- ,	van.	
ROSANA FIJALKOWSKY Name of Person		a: (4-0195
Nan	e of retson	. Area Code & Daytime Tel	ephone Number
Enclosed is a check for	or the 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 Status & Certified Copy (additional copy is enclosed)
Reg Div P.O	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, 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

MOTIC	ONBRICKS, LLC			
(Name of the Limited Liability (A Florida l	Y Company as it now appea Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability C	Company were filed on	12/17/2010	and ass	signed
Florida document numberL10000128908	⊸ ·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	ited liability company he	<u>re</u> :		
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Compa	any," the designation "LL	C" or the a	abbreviation
Enter new principal offices address, if applicable:		<u> </u>	20 č	
(Principal office address MUST BE A STREET ADDR	RESS)	2 - 1 2 - 2	3 X	W Mary word
) \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		Carticle Str. Mr.
Enter new mailing address, if applicable:		1-1 21		
(Mailing address MAY BE A POST OFFICE BOX)		C) - 		1.
		# 1 P		
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		our records, <u>enter th</u>	e name o	f the new
Name of New Registered Agent:	<u>.</u>			
New Registered Office Address:				<u>.</u>
	En	Enter Florida street address		
	City	, Florida	Zip Code	
	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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>MGRM</u>	CASTRO, DIEGO H	2801 NE 208 TERRACE 2ND FLOOR AVENTURA, FL 33180	Add ✓ Remove
<u>MGRM</u>	ZOLEZZI, CLAUDIO C	2801 NE 208 TERRACE 2ND FLOOR AVENTURA, FL 33180	☐ Add ☑ Remove
MGR	JUAN CARLOS DELANEY	20507 NE 9 PLACE MIAMI, FL 33179	✓ Add Remove
			Add Remove
•		21, rm; rm; rm; rm; rm;	
D. If amend	ing any other information, enter char	nge(s) here: (Attach additional sheets, if necessary.)	Remove
_			
Dated	,	2013 W	
		per or aut orized representative of a member	
		SANA FINALKOWSKY ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00