L1100000 9424

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APR - 7 2013 T. HAMPTON

COVER LETTER

TO:

TO:		ation Sect			
	3	38 S	EF LLC		
SUBJE	ECT:			ited Liability Company	1.00
The en	closed Ar	ticles of A	mendment and fee(s) are sub	mitted for filing.	
Please	return all	correspon	dence concerning this matter	to the following:	
			Richard N. S	Schermer	
				Name of Person	
			Pathman Le	wis LLP	
				Firm/Company	
			2 S. Biscayr	ne Blvd., #2400	
				Address	
			Maimi, FL 3	33131	
				City/State and Zip Code	
			rschermer@path	manlewis.com to be used for future annual report notific	estion)
Fou Su	المسائد سالسا				catteri
			neerning this matter, please ca		105
KIC.	charc		Schermer	_{at (} 305 ₎ 379-24	125
		Name of I	Person	Area Code Daytime	Telephone Number
Enclos	ed is a che	eck for the	following amount:		
1 \$2	5.00 Filin	g 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)
		Registrat Division P.O. Box	NG ADDRESS: tion Section of Corporations (6327 see, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

338 SEF LLC		<u> </u>
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number L1100009424 This amendment is submitted to amend the follow A. If amending name, enter the new name of the	ring: he limited liability company here:	and assigned FILED TALLANASSEE, F.
The new name must be distinguishable and end with the wo	rds "Limited Liability Company," the designation "LLC" of	A STATE OF THE PARTY OF THE PAR
Enter new principal offices address, if applicab	le:	<u> </u>
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable: (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 office	-	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	nner Fioriaa sireel address	
	, Flori	da Zip Code
	City	гір Сойе

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

000 OFF LLO

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member **Type of Action Address** Title <u>Name</u> 17071 W. Dixie Highway _■ Add MGR Sefran Management LLC N. Miami Beach, FL 33160 Remove 201-91 Country Club Dr. Lillian Macken MGR Aventura, FL 33180 ■ Remove Rachel Beispel 290 West End Avenue **MGR** □ Add New York, NY 10023 **■** Remove 166 East 63rd Street **MGR** Estate of Robert Franco □ Add New York, NY 10021 ■ Remove

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA