## L110000021427

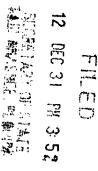
(Requestor's Name)				
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL.		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
,	JAN 3 2013			
S. TONER				





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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

IPF US Condo, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cynthia Legrand

Name of Person

IPF US Condo, LLC

Firm/Company

205 Collins Avenue

Address

Miami Beach, FI 33139

City/State and Zip Code

CLegrand@blanckara.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cynthia Legrand

Name of Person

<sub>31</sub>786<sub>2</sub>74-3034

Area Code & Daytime Telephone Number

Enclosed is a check for 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)

**MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 12 DEC 31 PM 3:52

SECRECIAL OF STATE

IPF US CONDO, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Lia Florida document number L11000021427	bility Company v	were filed or	02/18/2011	and assigned	
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liabi	lity compan	<u>y here</u> :		
The new name must be distinguishable and end with "L.L.C."	the words "Limite	ed Liability C	Company," the designation "Ll	C" or the abbreviation	
Enter new principal offices address, if applicable:		205 Collins Avenue			
(Principal office address MUST BE A STREET ADDRESS)		Miami Beach, Florida 33139			
Enter new mailing address, if applicable:		205 Colli	ins Avenue		
(Mailing address MAY BE A POST OFFICE BOX)		Miami Beach, Florida 33139			
B. If amending the registered agent and/or registered agent and/or the new registered offi			on our records, <u>enter th</u>	e name of the new	
Name of New Registered Agent:	Annette S. N	Annette S. Marciano ScHIFFLER Oc			
New Registered Office Address:	205 Collins	Avenue	ţ	·	
			Enter Florida street addr	ess	
	Miami Beach		, Florida 33	, Florida <u>33139</u>	
	•	City		Zip Code	
New Registered Agent's Signature, if changing Re	gistered Agent:				
I hereby accept the appointment as registered the provisions of all statutes relative to the pro accept the obligations of my position as regist being filed to merely reflect a change in the re company has been notified in writing of this ci	oper and comple ered agent as p gistered office o	ete perform rovided for	ance of my duties, and I ar in Chapter 608, F.S. Or, i	n familiar with and f this document is	

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 <u>Address</u> **Type of Action** Add Remove Remove Remove

Add

Remove

D. If amending any other information, enter change(s) here: (Altach additional sheets, if necessary.)  New address for Annette S. Marciano (Manager) SCHIFFLER
205 Collins Avenue
Miami Beach, Florida
December 2012
Signature of a member or authorized representative of a member
Annette S. Marciano SCHIFFLER  Typed or printed name of signee
Page 3 of 3
Filing Fee: \$25.00