## L11000025812

(Re	questor's Name)			
(Ad	dress)	786-6-19		
(Ad	dress)			
(Cit	y/State/Zip/Phone	<b>⇒</b> #)		
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(Bu	siness Entity Nan	ne)		
(Document Number)				
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SECRETARY OF STATION OF CORPORATION

N. Cuttigan MAR 25 2011

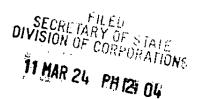
## **COVER LETTER**

TO: Registration Sect Division of Corpo		•		
SUBJECT: 1N		ERCIAL PROPERTIES LLC	<u>C</u>	
The enclosed Articles of Articles of Articles return all correspond				
		BARRY BERGMAN		
		Name of Person		
	INDYMAC C	OMMERCIAL PROPERTIES L	.LC	
	Firm/Company			
	5300 NW 12 AVENUE #1			
		Address	<u> </u>	
	FORT	LAUDERDALE, FL 33309		
	City/State and Zip Code			
	INDYMAC	PROPERTIES@GMAIL.COM	,	
		to be used for future annual report notification	on)	
For further information con-	cerning this matter, please of	call:		
TANYA ELDRIDGE Name of Person		at ( 954 ) 302-871	4 EXT 102	
Nume of the		Alea code de Daytime Per	epitotic Nutrices	
Enclosed is a check for the f	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 Registratio	G ADDRESS:	STREET/COURIER A	ADDRESS:	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



INDYMAC COMMERCIAL PROPERTIES 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 Liab	oility Company were filed on	3/1/2011	and assigned
Florida document numberL110000258			
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of the	he limited liability company her	<u>'e</u> :	
The new name must be distinguishable and end with 1 "L.L.C."	the words "Limited Liability Compa	iny," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET.	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO			
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:	· · ·	·	
	Enter Florida street address		
	, Florida City 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 Title <u>Name</u> **Address Type of Action** MGR ADAM LEVINSON 5300 NW 12 AVENUE #1 ☐ Add FORT LAUDERDALE, FL 33309 ✓ Remove LISA BERGMAN MGR 5300 NW 12 AVENUE #1 ✓ Add FORT LAUDERDALE, FL 33309 Remove Add 🔲 Remove Add Remove □Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member of authorized representative of a member BARRY BERGMAN Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00