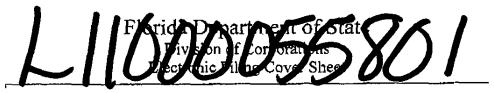
Division of Corporations

Page 1 of 2



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000106291 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GUZMAN & GUZMAN, P.A.

Account Number : I20080000090 Phone : (305)670-1991

: (305)670-1993 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please .\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HAWAIIAN PALMS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HAWAIIAN PALMS, LLC			
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our records.) mited Liability Company)		
The Articles of Organization for this Limited Liability Com Florida document number L11000055801	pany were filed on 05/11/2011	and as	signed
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	l liability company here:		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or	the abbreviation "I	L.C."
Enter new principal offices address, if applicable:			~ <del>~~</del>
(Principal office address MUST BE A STREET ADDRES	55)		
Enter new mailing address, if applicable:		<del></del>	
(Mailing address MAY BE A POST OFFICE BOX)		73 2 <u> </u>	
		1-0	- Carajera
B. If amending the registered agent and/or register	. 1	Trans. (20)	apperent
B. If amending the registered agent and/or registered agent and/or the new registered office address		A A	TTI
Name of New Registered Agent:		<u>55 .e</u>	
New Registered Office Address:			
	Enter Florida street address		
	, Florid	laZip Code	
	Ciù	zip c.oae	

## 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 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	HALPERN, CESAR	HALPERN, CESAR 9130 S DADELAND BLVD	
		SUITE 1509	■ Remove
		MIAMI FL, 33156	Change
MGR	G & G MANAGEMENT US LLC	9130 S DADELAND BLVD	Add
		SUITE 1509	
		MIAMI FL, 33156	Remove
			☐ Change
<del></del>			Add
			☐ Remove
			Change
<del></del>			Add
			☐ Remove
			Change
			DAdd
			Remove
			Change
			☐ Remove
			Change

If amending	any other informatio	n, enter ci	hange(s) here	e: (Attach a	dditional she	ets, if necessa	ויניו)	
<del></del>				···	<u> </u>			
<del></del>				. <u></u>		·		<del></del>
					<u>-</u>			<del></del>
-								
			<u> </u>			<del></del>		<del></del>
					<del>_</del>			
							<u></u> _	
<del></del>								<del> </del>
··········						<u> </u>	<del></del>	
<u></u>	<del></del>					72	201	
				<del></del>				emilion.
						TE SE	APR 2	
			· <u></u> -			<u> </u>	<u>ۃ</u>	1.5
		<del></del>				11 - 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	$\frac{\mathcal{D}}{\mathcal{O}}$	
TARE - A 1 1 A						(optional	م س	
If an effective di <u>Note:</u> If the o	te, if other than the da atc is listed, the date must be date inserted in this block flective date on the Depa	specific and does not m	cannot be prior	to date of filing	or more than 9 filing require	0 days after filing	z.) Pursus	nnt to 605.0207 It be listed as
ne record s The 90th	pecifies a delayed e day after the record	fective d is filed.	ate, but no	t an effecti	ve time, at	12:01 a.m.	on the	e earlier of
Dated APRIL	. 29	,	2016	<u>.</u> .	<b>-</b> 9			
			( langer					
_	Sig	nature of a m	culter arouth	rited represent	ative of a mem	her		<del></del>
	& G MANAGEMENT U	_	/					

Page 3 of 3