L11000057122

(Requestor's Name)
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COVER LETTER

TO: Registration Se Division of Cor			
Elemis Ran	nch, LLC		
30BJEC1.	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	-	
	Cristina Blanco		
		Name of Person	
	Marcum LLP		
		Firm/Company	
	One SE 3rd Avenue, Suite	1100	
		Address	
	Miami, FL 33131		
		City/State and Zip Code	
	MFO-Cristy@marcumllp.co	om to be used for future annual report notil	reation)
For further information of	concerning this matter, please c	-	icanony
Cristina Blanco		305 305-995-967	
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	ORGANIZATION OF any as it now appears on our records.) Liability Company) were filed on May 13, 2011 and assigned.
Elemis Ranch, LLC	
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on May 13, 2011 and assigned and assigned
Florida document number L11000057122	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	One SE 3rd Avenue, Suite 1100
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33131
Enter new mailing address, if applicable:	One SE 3rd Avenue, Suite 1100
(Mailing address MAY BE A POST OFFICE BOX)	Miami. FL 33131
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new register
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

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 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>	<u>Name</u>	Address	Type of Action
MGR	Ethrensa Family Trust Company	1 SE 3rd Avenue, Suite 1100	= Add
		Miami, FL 33131	□Remove
			Change
MGR	Barry M Brant	200 South Biscayne Blvd, 6th Flort	□Add
		Miami, FL 33131	Remove
			□Change
			
			□ Remove
			□Change
			□Add
,		· · · · · · · · · · · · · · · · · · ·	□Remove
			□ Change
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			□Add
			□Remove
			□ Change

Effective date, if other than the date of filing: [If an effective date is issed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 695.0297 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12.01 a.m. on the earlier of: (b) The 90th day after the ord is filed. Dated Signature of a member or authorized representative of a member Alan Davidson, Director of Ethreasa Family Trust		
Effective date, if other than the date of filing:		
Effective date, if other than the date of filing:	*	
Effective date, if other than the date of filing:	_	
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	Dated_	Maya-
		Signature of a member or authorized representative of a member