L11000065320

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J. BRYAN

AUG -1 2011

EXAMINER

COVER LETTER

1 0:	Division of Co	rporations			
SUBJE	ECT:	RHO	MB2107, LLC		
30001	<u></u>		nited Liability Company		
The en	closed Articles of	Amendment and fee(s) are so	ubmitted for filing.		
Please	return all correspo	ondence concerning this matte	er to the following:		
			RI HERTZBERG BASSUK		
			Name of Person		
			CLEAR TITLE GROUP		
			Firm/Company		超るか
		MI	CHIGAN AVENUE, #320	·	題に
		Address			SSE P
)	FILEU III. 15 JUL 29 PH 1: 15		
		17.400.11	City/State and Zip Code		15
		JBASSUM E-mail address:	©CLEARTITLEGROUP.C (to be used for future annual report noti	fication)	P
For fur	ther information of	concerning this matter, please	call:		
		RRI BASSUK	at (_305)	695-2699	
	Name o	of Person	Area Code & Daytin	ne Telephone Number	
Enclose	ed 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	d) Certified	e of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ration Section on of Corporations ox 6327	STREET/COUR Registration Section Division of Corpor Clifton Building 2661 Executive C Tallahassee, FL 3	on rations enter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	RHOMB	2107, LLC			
(<u>Nar</u>	ne of the Limited Liability Comp (A Florida Limited	any as it now appea Liability Company)	rs on our records.)		
-	or this Limited Liability Compar	ny were filed on	06/03/2011	and assigned	
Florida document number	L11000065320				
This amendment is submitted t	to amend the following:				
A. If amending name, enter	the new name of the limited lia	bility company her	<u>·e</u> :		
The new name must be distinguing	shable and end with the words "Lir	nited Liability Compa	any," the designation "L	LC" or the abbreviation	
Enter new principal offices a	ddress, if applicable:				
(Principal office address MUS	ST BE A STREET ADDRESS)	 		500 当 丁	
Enter new mailing address, i (Mailing address MAY BE A			· · · · · · · · · · · · · · · · · · ·	29 PR II	
Muung uuness MAT DLA	TOST OTTICE BOX			75 55	
	ered agent and/or registered of the registered o		our records, <u>enter t</u>	he name of the new	
Name of New Regist	ered Agent:				
New Registered Office	ce Address:	Fu	ter Florida street add	ross	
	•				
		City	, Florida	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 <u>Title</u> <u>Address</u> Type of Action <u>Name</u> MGRM Ilya Reznik 21399 MARINA COVE CIRCLE #12 ☐ Add √ Remove Aventura, Florida 33180 Aleksandr Sorsher MGRM 2500-1 N State Road 7 ✓ Add Hollywood, Florida 33021 Remove _ Add Remove ∏Add Remove ∏Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated July 18 , 2011

Signature of a member or authorized representative of a member

JAY PARKER

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00