Division of Cormations

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(((H11000234888 3)))



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To:

Division of Corporations

Pax Number : (850)617-6383

From:

ACCOUNT Name : ARAZOZA, COMAS, DE TORRES & FERNANDEZ-FRAGA, P.A.

Account Number : 076624003440 : (305)444-6226 Phone

Fax Number : (305)442-4829

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 3072 HOLDINGS, LLC

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SEP 28 2011

EXAMINER

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H11000234888 3 COVER LETTER

	Corporations			
SUBJECT: _	3072 H	OLDINGS, LLC		
3000 ECT		ited Liability Company		
The enclosed Article	s of Amendment and fee(s) are su	bmitted for filing.		
Please return all corr	espondence concerning this matte	r to the following:		
		LAURA KOHN		
		Name of Person		
	ARAZOZA	& FERNANDEZ-FRAGA, P.,	<u>4</u>	
		Fitm/Company		
	2100 SALZEDO STREET, SUITE 300		100	=
		Address	AHA AHA	SEP *
	CO	CORAL GABLES, FL, 33134		EP27 AH 9:
	۱۵	City/State and Zip Code LAURA@ARAZOZA.COM		3 17
	E-mail address:	to be used for future annual report notificat	STA LOR	× €
For further informati	on concerning this matter, please	call:	DA TE	ວັ
	LAURA KOHN	at (305) 444-(3226 x <u>233</u>	
Nat	me of Person	Area Code & Daytime T	clephone Number	
Enclosed is a check f	or the following amount:			
]\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Ssp.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	ed)
	AILING ADDRESS:	STREET/COURIER Registration Section	ADDRESS:	

Registration Section
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

2072 HOLDINGS LLC

(Name of the Limited Liability Co	mpany as it now appear ted Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Comp. Florida document number L11000065944	oany were filed on	06/03/2011	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited		± ÷	
The new name must be distinguishable and end with the words "L.L.C."	LDINGS, LLC Limited Liability Compa	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES.	<u>s)</u>		,
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			IT SEP 27
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		ur records, <u>enter 1</u> 1	hername opthe new
Name of New Registered Agent:			
New Registered Office Address:		er Florida street addi	
	Ent	er rigrida stre et a ddi	ress
	Cin	, Florida	7:- Cada
	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. If urther 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

HI 1000234888 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:

	Name	Address	Type of Action
			[7] Dam
			[] N
			F 2
AMANGARAN			F-1
			() D
			(
famenc	ling any other information, ente	r change(s) here: (Attach additional shee	ts, if necessary.)
			SEP
			SEP 27 AH A AHASSEE, FLC
	AUGUST 30	<u>2911</u>	SEP 27 AH 9: 20 AHASSEE, FLORIDA

Page 2 of 2

Filing Fee: \$25.00