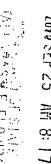
(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP MAIL WAIT (Business Entity Name) (Document Number) Certificates of Status ___ Certified Copies _____ Special Instructions to Filing Officer:

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COVER LETTER

TO: Registration Se Division of Co				
SUBJECT: LAUI	DERHILL INVE	ESTORS, LLC		
SUBJECT:		ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		Name of Person		
	LAUDERHIL	L INVESTORS, L	.LC	
		Firm/Company		
	3040 MCDO	NALD STREET		
		Address		2
	MIAMI, FL 3	3133	ि क 	20 13 SEP
		City/State and Zip Code		타 25
	E-mail address: (1	o be used for future annual report notificati	on) (**	
For further information c	oncerning this matter, please ca	all:	9. <u>7</u>	AM 6:
_		at ()		
Name o	f Person	Area Code & Daytime Te	tephone Number	
Enclosed is a check for the	ne 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	;

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LAUDERHILL INVESTORS					
(Name of the Limited (A		_			
The Articles of Organization for this Limited Liability Company were filed on 07/11/2011 Florida document number L11000079603					d
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liab	oility company here:			
The new name must be distinguishable and end with "L.L.C."	h the words "Limi	ted Liability Company," the designation "I	LC" or th	he abbre	viation
Enter new principal offices address, if applicable: 3040 MCDONALD STREET					
(Principal office address MUST BE A STREE)		MIAMI, FL 33133	-3		
	······································		4	2013	
				55	-
Enter new mailing address, if applicable:		3040 MCDONALD STREET	₹54. (N)	25	, s and
(Mailing address MAY BE A POST OFFICE I	MIAMI, FL 33133				
			۵ ۲۰۰۰	က <u> </u>	
			3Å		
B. If amending the registered agent and/o registered agent and/or the new registered off			he nam	e of the	e new
Name of New Registered Agent:	MARIANNI	E CORDOVEZ			
New Registered Office Address:	3040 MCD	ONALD STREET			
		Enter Florida street add	ress		

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 offices, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chafter 108, V.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.

City

MIAMI

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>Name</u> **Address** Type of Action 16400 NW 59 AVENUE **ALEXANDER RUIZ MGR** MIAMI LAKES, FL 33014 3040 MCDONALD STREET MGR MARIANNIE CORDOVEZ MIAMI, FL 33133 Remove Remove Remove Remove Remove

D. If	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	SEPTEMEBER 13 2013/
	Signature of a member or authorized representative of a member
	MAŔIAŃNIE CORDOVEZ
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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