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EXAMINER

COVER LETTER *		
TO: Registration Section Division of Corporations		
SUBJECT: Ocean Pearl 3406 LLC Name of Limited Liability Company		
The enclosed Articles of Amendment and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Jason S. Weiss Name of Person		
Smith and Verbit Firm/Company	·	
9900 Stilling Road Suite 303	12 JAN -	<u> </u>
Cooper City Florida 33024 City State and Zip Code Tason Nieiss @ smith year hit cooper	IAN -3 PH 3: 08	LED
E-mail address: (to be used for future annual report notification)	. O	
For further information concerning this matter, please call:		
Jason S. Weiss at (954) 965 · 8350 Name of Person Area Code & Daytime Telephone Number	_	
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$30.00 Filing Fee \$ \$55.00 Filing Fee \$ \$60.00 Filing Fee \$ Certificate of Status Certified Copy (additional copy is enclosed) \$ Certified Copy (additional copy is enclosed)	Status &	sed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Occar Pearl 3406 (Name of the Limited Liability Compai	LLC	
(A Florida Limited L	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document numberL\\000090173	were filed on August 5, 2011 and assig	ned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
	1 mg m	
The new name must be distinguishable and end with the words "Limi "L.L.C."		breviation
Enter new principal offices address, if applicable:	(2) L	
(Principal office address MUST BE A STREET ADDRESS)		Π
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>	9900 Stirling Road, Ste 3 Cooper City, Florida 3302	303 -4
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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. 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 Title Name 1 **Address Type of Action** Tropical Management Tropical Management Group LCC MGRM 33662 ☐ Add ☐ Add Remove ☐ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 30 . 2011 Signature of member or abthorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00