

Oct 24, 2011 1:28PM
Division of Corporations

Ritter, Zaretsky & Lieber, LLP

No. 9040 P. 2
Page 1 of 1

L110000591052

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H11000255052 3)))



H110002550523ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : RITTER, ZARETSKY & LIEBER, LLP
Account Number : I20010000015
Phone : (305) 372-0933
Fax Number : (305) 704-8111

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

Email Address: olieber@rllaw.com

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 OCT 24 AM 9:32

FILED

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CG TIDES LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

C. LEWIS

OCT 25 2011

EXAMINER

RECEIVED
2011 OCT 24 AM 8:00
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

Oct. 24. 2011 1:28PM Ritter, Zaretsky & Lieber, LLP.

No. 9040 P. 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CG TIDES 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:

OREN LIEBER, ESQ.

Name of Person

RITTER ZARETSKY & LIEBER, LLP

Firm/Company

2915 BISCAYNE BLVD., SUITE 300

Address

MAIMI, FLORIDA 33137

City/State and Zip Code

OLIEBER@RZLLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

OREN LIEBER, ESQ.

Name of Person

at (305)

372-0933

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee☐ \$50.00 Filing Fee &
Certificate of Status☐ \$25.00 Filing Fee &
Certified Copy
(additional copy is enclosed)☐ \$50.00 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/COURIER ADDRESS:

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

Oct. 24, 2011 1:28PM Ritter, Zaretsky & Lieber, LLP.

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

No. 9040 FILED

2011 OCT 24 AM 9:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDACG TIDES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/08/2011 and assigned
Florida document number L11000091052

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

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

Oct. 24. 2011 1:29PM Ritter, Zaretsky & Lieber, LLP.

No. 9040 P. 5

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:

MCR = Manager

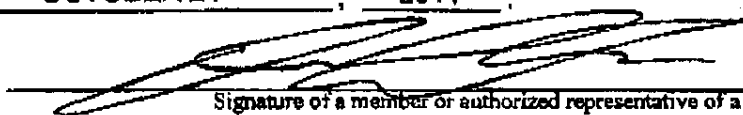
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	JOSEPH CHETRIT	2915 BISCAYNE BLVD., SUITE 300 MIAMI, FLORIDA 33137	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	MEYER CHETRIT	2915 BISCAYNE BLVD., SUITE 300 MIAMI, FLORIDA 33137	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

Dated OCTOBER 24, 2011



Signature of a member or authorized representative of a member

Oren Lieber

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 OCT 24 AM 9:32

FILED