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SECRETARY OF STATE
ALL AHASSEE, FLORIDA

J. BRYAN

SEP 2 6 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Brickenhouse Holding UC 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:
Julian F. Montero Name of Person
Montero Wolkov LLP Firm/Company
1441 Brickell Ave 15Th Floor
Miami Florida 33131 City State and Zip Code JMontero @Montero Wolkov. com E-mail address: (to be used for future annual report notification)
Imontero @monterowolkov.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JUlian Montero Jessica Wolfat 305, 297-1878 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{S25.00 Filing Fee & Certificate of Status}\$\$ \$\text{Certified Copy (additional copy is enclosed)}\$\$ \$60.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brickenhouse	e Holding U	<u>, C</u>
(Name of the Limited Liability (A Florida L	Company as it now appears of Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Co	ompany were filed on <u>() }</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limi</u>	ted liability company here:	
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Company,"	" the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SEP 23 PN 1:47 OREITARY OF STATE AHASSEE FLORID:
B. If amending the registered agent and/or registered agent and/or the new registered office addr		records, enter the name of 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member

<u>Title</u> <u>Address</u> **Type of Action** HARVEY HERNANDEZ 1200 Brickell Avenue MAR Remove □Add Remove ∏Add Remove □Add Remove ∏Add | Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated gnature of a member or authorized representative of a member Tulian F. Montaro
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00