LII 000095151

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SECRETARY OF STATE

T. CLINE
OCT 2 1 2011
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT:		DOWNTOWN CI				
		Name of Limi	Name of Limited Liability Company			
The enclosed Arti	icles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all c	correspo	ndence concerning this matter	to the following:			
		Yola	anda Katon, Legal Asst.			
			Name of Person			
		/	Alex D. Sirulnik, P.A. Firm/Company			
	•	2701 Pc	once De Leon Blvd. Ste 202			
			Address			
		Co	Coral Gables, FL 33134		2011 OCT 20. AM ION SECRETARY OF STA ALLAHASSEE, FLOR	-
			City/State and Zip Code		TAR ASS	usta er estilari
ykaton@sirulniklaw.com E-mail address: (to be used for future annual report notification)						ſĭ
		•	·	ation)	FLOST/	-
For further inform	nation c	oncerning this matter, please o	all:		SE SE	
	Yo	landa Katon	at (305) 4	43-7211		
	Name o	f Person	Area Code & Daytime	Telephone Number	r	
Enclosed is a chec	ck for th	ne following amount:				
▼ \$25.00 Filing		\$30.00 Filing Fee &	\$55.00 Filing Fee &	┌]\$60.00 Fil	ling Fee.	
V V 25.00 Filling		Certificate of Status	Certified Copy (additional copy is enclosed)	Certifica Certified	ite of Status &	ed)
		ING ADDRESS:	STREET/COURIE			
Registration Section Division of Corporations			Registration Section Division of Corpora			

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Downtown City Properties,	LLC			
(<u>Name</u>	of the Limited Liability Company as it now app (A Florida Limited Liability Compan	pears on our records.)			
The Articles of Organization for	his Limited Liability Company were filed on _	August 18, 2011	and assigned		
Florida document number	L11000095151				
This amendment is submitted to a	amend the following:				
A. If amending name, enter the	new name of the limited liability company	here:			
The new name must be distinguisha "L.L.C."	ble and end with the words "Limited Liability Cor	mpany," the designation "LI	C" or the abbreviation		
L.L.C.		ĪĀ	20 S		
Enter new principal offices add	ress, if applicable:		2 =		
(Principal office address MUST	BE A STREET ADDRESS)				
		ςς γ	20 20		
		ייין. רָיז			
Enter new mailing address, if a	pplicable:		SIA CO		
(Mailing address MAY BE A PO	ST OFFICE BOX)		m en		
			No. of the second second		
	l agent and/or registered office address o	n our records, <u>enter th</u>	e name of the ne		
registered agent and/or the new	registered office address here:				
N CN D '					
Name of New Registere	d Agent:				
New Registered Office					
		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

<u>Title</u>	<u>Name</u>	Address	Type of Action			
MGR	Damian D. Dorfman	1000 E Hallandale Beach Bivd Hallandale Beach FL 33009	Add Remove			
MGR_	Walter Fischer	1000 E Hallandale Beach Blvd Hallandale Beach FL 33009	Add Remove			
			Add Remove			
			Add Remove			
		SECRETARY OF STALL AHASSEE FLO	dd Tremove OC 7 20 Add Remove			
D. If amending	g any other information, enter change(s	here: (Attach additional sheets, if necessary.)	- Man			
			-			
 Dated	October 19, , 2011		-			
_	An					
		authorized representative of a member				
Alex D. Sirulnik, Esq. Typed or printed name of signee						

Page 2 of 2

Filing Fee: \$25.00