L11000096490

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SECRETARY OF STATE
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N. Gulligan JUN - 7 2012

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	MARQUIS	UNIT 3904, LLC	
30 3 0 2 01.		ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
		Jorge E. Otero, Esq.	
		Name of Person	
		Firm/Company	
75 Valen		encia Avenue, Second Floor	•
		Address	
		City/State and Zip Code	
		jeo@oterolaw.com	
•	·	to be used for future annual report notifical	tion)
For further information of	concerning this matter, please o	eall:	
Jo	rge E. Otero	at (305) 56	67-9000
Name o	of Person	Area Code & Daytime T	elephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fec	\$30.00 Filing Fcc & Certificate of Status	\$55.00 Filing Fee & 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

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12 JUN -6 AM 10: 85
SEUNE FANY DE STE

MARQUIS UNIT 3904, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) August 23, 2011 The Articles of Organization for this Limited Liability Company were filed on _ and assigned L11000096490 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: North Polar 7070, LLC 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

Citv

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida

Zip Code

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:

MGRM = M	inger Innaging Member	yand _{va} fi	agas un su supra an u
Title	Name	Address	Type of Action
MGRM	Rafaei Gonzalez de Castro	1100 Biscayne Blvd., Unit 3904 Miami, EL 33132	Add.
			Add Remove
***************************************	Notes and the second		Aid; Remove
ŧ	,		Add
40			Add Rentove
			Add Remove
D. If amend	lag any other information, enter chang	e(9) here: (Assach addisional sheets, if necessary)	JUN -6
			SEE, FLORIDA
Dated		112 .	_
	Rafa	Per anthorized representative of a member : lef Gonzalez Yanes or printed name of signes	***

Page 2 of 2

Filing Fee: \$25.00