11000102605

(Re	equestor's Name)		
(Ac	ldress)	· · · · · · · · · · · · · · · · · · ·	
(Ac	ldress)		
(Cir	ty/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Ві	ısiness Entity Nar	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		
	<u> </u>		

Office Use Only



000236940030

07/09/12--01049--021 **325.00

TOPE TARY OF STATE
SEVER TARY OF STATE
AND AHASSEE, FLORID

J. BRYAN

JUL 1 0 2012

EXAMINER

COVER LETTER

TO: Resistration S Division of Co				
SUBJECT:	TSP BE	ECKANNA, LLC		
		nited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are su	abmitted for filing.		
Please return all corresp	pondence concerning this matte	er to the following:		
		Vanette Lugo		
		Name of Person		10 P
		Trade Street		FILED PH 3: 28
		Firm/Company		6 m
1995		Country Club Drive, Suite 8	00	是可是
		Address		[6] 2. 2
		Aventura, FL 33180		A CONTRACTOR OF THE PARTY OF TH
		City/State and Zip Code		
	- V	ugo@trade-street.com		
	E-mail address:	(to be used for future annual report notifi	cation)	
For further information	concerning this matter, please	call:		
\	/anette Lugo	at (786)	248-6017	
	of Person	Area Code & Daytime	Telephone Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
MAI	LING ADDRESS:	STREET/COURU	ER ADDRESS:	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	SP BECKANNA, LLC		
(Name of the Limited Li (A F	ability Company as it now appears or orida Limited Liability Company)	1 our records.	
The Articles of Organization for this Limited Liab Florida document numberL110001026	• • •	09/07/11	and assigned
This amendment is submitted to amend the follow A. If amending name, enter the new name of the	-		THE WALL
The new name must be distinguishable and end with t		' the designation "	LLC" or the abbreviation
"L.L.C."	no norus Emmou Emonity Company,	ine designation	7.57
Enter new principal offices address, if applicab	le:		6
(Principal office address MUST BE A STREET.	ADDRESS)		चेंद्र
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter	the name of the new
Name of New Registered Agent:		······································	··· - ··· ·· ·· ·· ·· ·· · · · · · · ·
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
	Citv		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 = N	Janaging Member		
<u>Title</u>	Name	Address	Type of Action
MGR	BSF TSC GP, LLC	19950 W. COUNTRY CLUB DRIVE, SUITE 800 AVENTURA, FL 33180	Add Remove
MGR	TS Manager, LLC	19950 W. COUNTRY CLUB DRIVE, SUITE 800 AVENTURA, FL 33180	_ ✓ Add ☐ Remove
			Add Remove
			Add Remove
			S Add Remove
D. If amen	ding any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.)	_ □Add Ay
_			
			- - -
Dated	June 5	2012 . // Les	
	Signature of a mo	ember or authorized representative of a member	 .
		Bert Lopez	
	7	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00