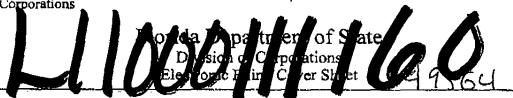
Division of Corporations

Page 1 of 1



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.

(((H11000266389 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305)634-3694 Fax Number : (305)633-9696

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SILVER FOX HOMES LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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H110007663891

## **COVER LETTER**

TO:	Registration Section Division of Corpor		,			
SUBJECT: SILVER FO			OX HOMES LLC			
		Name of Limi	ited Liability Company			
The en	aclosed Articles of Am	cadment and fee(s) are sul	bmitted for filing.			
Picase	return all corresponde	nce concerning this matter	to the following:			
	-	MA	RITZA E. PEREZ, FRI	P		
			Name of Person			
	_	C	ANTOR & WEBB P.A.			
			Pirm/Company			
	1001 BRICKELL BAY DRIVE, SUITE 3112				,	
	-		Address		<u> </u>	
		М	IAMI, FLORIDA 33131			*****
	•		City/State and Zip Code			1
	~		ZA@CANTORWEBB.( to be used for future annual report		- SSE	
For fu	rther information conc	eming this matter, please of	•	at my management	AM 9: OF ST E. FLO	
	MARITZ	A E. PEREZ	at( 305 )	374-3886	F 50 TATE ORID	
	Name of Pe		Area Code & I	Daytime Telephone Number		
Enclos	ed is a obeck for the f	ollowing amount:				
<b>\$2</b>	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified	of Status &	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registration Division of C Clifton Build	Corporations ling ive Center Circle			

H110007663891

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SI	LVER FOX	HOMES LL	.C		
(Name of the Limited	Liability Compa Florida Limited	ny as it now app Liability Company	ears on our records.)	-	
The Articles of Organization for this Limited Li	ability Company	were filed on S	SEPTEMBER 28, 20	11 and assigned	
Florida document number L11000111	160				
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liab	ility company l	here:		
	N/A	4			
The new name must be distinguishable and end wit "L.L.C."	h the words."Lim	ited Liability Con	opany," the designation "L	LC or the abbrev	поізв
Enter new principal offices address, if applic	N/A		<u> </u>	<u>.</u>	
(Principal office address MUST BE A STREET ADDRESS)		N/A	<del></del>	>> 2	<u> </u>
		N/A		A	
				SEX XX	
Enter new mailing address, if applicable:	N/A		<u>Ş</u>		
(Mailing address MAY BE A POST OFFICE	<u>rox)</u>	N/A		- ES - 6	
		N/A		RATE S	
B. If amending the registered agent and/or the new registered of			our records, <u>enter th</u>	e name of the	new
Name of New Registered Agent:	N/A		·		_
New Registered Office Address:	N/A				
		•	Enter Florida street addr	S22	
		N/A	, Florida	N/A	
		City		Zip Code	
New Registered Agent's Signature, if changing F	legistered 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 Hability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member helps added or removed from our records:

MGRM = N	lanaging Member		
Title	<u>Name</u>	Address	Type of Action
MGRM	ALBERTO MATONE	C/O 1001 BRICKELL BAY DRIVE SUITE 3112 MIAMI, FLORIDA 33131	Add Remove
MGR	ALBERTO MATONE	C/O 1001 BRICKFLL BAY DRIVE SUITE 3112 MIAMI, FLORIDA 33131	[7] Add Remove
			Add Remove
			Add Ramove
<del></del>			Add
			AddRemove
D. If amend		ange(1) here: (Attach additional sheets, if necessar	II NOV -B AN
Dated	,	uber or authorized representative of a member	9:50 STATE LORIDA
	T)	yed or printed name of signee	
		Page 2 of 2	

71/08/2011 16:27

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Filing Fee: \$25.00

MGR = Manager