	Florida Department of State Division of Corporations Electronic Filing Cover Sheet	970
	print this page and use it as a cover sheet. Type on below) on the top and bottom of all pages of the	
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To: From:	Division of Corporations Fax Number : (850)617-6383	9 AH 7: 46 SEE, FLORIDA
	ail address for this business entity to port mailings. Enter only one email address:	
RECEIVED APR-9 PM 1:38 CRETARY OF STATE CAHASSEE, FLORIDA	AMND/RESTATE/CORRECT OR M/MO FRV I, LLC Certificate of Status 0 Certified Copy 0 Page Count 03 Estimated Charge \$25.00	
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02/19/2030 01:55 H12000092451 #4915 P.002/003 Apr. 9. 2012 11:29AM BH Capital No. 2003 F. 3 FILED' 12 APR -9 AM 7: 46 ARTICLES OF AMENDMENT SECRELARY OF STATE TALLAHASSEE, FLORIDA TO ARTICLES OF ORGANIZATION OF FRV I LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ____October 24, 2011 and assigned L11000121240 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: 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 Office Address:	Ente	Enter Florida street address	
		.Florida	
	City	Ztp Code	
Now Registered Agent's Signature, if changing R	egistered 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.

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manazer or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Title Type of Action Name Address MGR Mariannie Cordovez 3040 McDonaid Street Miami, EL 33133 Add Remove MGR Ventures Condo 1200 Ponce de Leon Boulevard 2nd Fit M Add Management, Inc. 2nd Eloor Remove Miami, FL 33133 🗋 Add 门 Remove DbA Remove DVQ Remove Remove D. If amending any other information, enter change(s) here: (Anach additional sheets, if necessary.) March 28 201 Dated

> Signature of a memoer of authorized representative of a member Mariannie Cordovez

> > Typed or printed name of signes Page 2 of 2

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