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EXAMINER

COVER LETTER

** TO: Registration Section
Division of Corporations

SUBJECT: PORTOFINO CAPITAL AD	OVISORS, LLC
Name of Limited Liability Co	ompany
Dear Sir or Madam:	
The enclosed Articles of Correction and fee(s) are submitted for filing	
Please return all correspondence concerning this matter to the following	ng:
Jay E. Auerbach, Esq.	_
Name of Person	
KHANI & AUERBACH	_
Firm/Company	_
2338 Hollywood Blvd.	
Address	_
Hollywood, FL 33020	_
City/State and Zip Code	
jay@hollywood-law.com E-mail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call:	
Jay E. Auerbach at (954)921-1517
Name of Person Area Co	ode & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee \$30 Filing Fee & \$55 Filing Fee & Certificate of Status Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST	The name of the limited liability company is: PORTOFINO CAPITAL ADVISORS, LLC	<u></u>				
<u>SECO</u>	ND: The articles of organization or the application to transact business					
<u>(CH</u>	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STA	TEMENT				
√	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Article V incorrectly named the managing members and their addresses. The					
	correct name of the managing member of the LLC is Blue Sky Capital					
	Partners, LP, a Texas limited partnership. The correct address for the	Managing	•			
	Member is: 1110 North Brand Blvd., #200, Glendale, CA 91202.					
	<u>OR</u>					
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:					
Dated:	November 77 , 2011 . Signature of a member or authorized representative of a member	2011 NOV SECRET	T :			
	Dr. F. Mike Bardi	JV 28 ETAR HASSI				
	Typed or printed name of signee	8 PM RY OF S	T			
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	H 1: 37 F STATE FLORID				

Electronic Articles of Organization For Florida Limited Liability Company

L11000128693 FILED 8:00 AM November 14, 2011 Sec. Of State thampton

Article I

The name of the Limited Liability Company is: PORTOFINO CAPITAL ADVISORS, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

2932 WILSHIRE BLVD. SUITE 205 SANTA MONICA, CA. US 90403

The mailing address of the Limited Liability Company is:

2932 WILSHIRE BLVD. SUITE 205 SANTA MONICA, CA. US 90403

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

JAY E AUERBACH 2338 HOLLYWWOOD BLVD. HOLLYWOOD, FL. 33020

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: JAY E. AUERBACH

Article V

The name and address of managing members/managers are:

Title: MGRM F. BARDI 2932 WILSHIRE BLVD., #205 SANTA MONICA, CA. 90403

Title: MGRM DALIA BARDI 2932 WILSHIRE BLVD., #205 SANTA MONICA, CA. 90403 US L11000128693 FILED 8:00 AM November 14, 2011 Sec. Of State thampton

Signature of member or an authorized representative of a member

Electronic Signature: F. MIKE BARDI

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.