U1000129519

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SECRETARY OF STATE
FALLAHASSEE, FLORID.

D. BRUCE

NOV 28 2011

EXAMINES

COVER LETTER

TO: Registration Division of C	Section orporations				
SUBJECT:	Mortgage Inde	nture Series 2011ztda	а		
SUBJECT:		ted Liability Company			
	of Amendment and fee(s) are sub	-			
r lease return an corres	pondence concerning this matter	to the following.			
		Matthew Estevez			
		Name of Person			
Matthew Estevez, P.A.					
		Firm/Company			
777 Brickell Ave, Suite 1114					
		Address			
		Miami, FL 33131	•	- E	
	,	City/State and Zip Code		NOV 23 PH 4: AHASSEE, FLO	
	E-mail address: (aczurich@gmail.com to be used for future annual report no	otification)	-me z m	
For further information	n concerning this matter, please c	all:		H 4: 58	
Z	achary Zurich	at (_954_)	5570389	A A	
Nam	e of Person	Area Code & Day	time Telephone Nur	mber	
Enclosed is a check for	r the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certi sed) Certi	Filing Fee, ficate of Status & fied Copy tional copy is enclosed)	
Regi Divi P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 shassee, FL 32314	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive	porations g	S:	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mortgage Indent	ure Series 2011zt	da, LLC		
(<u>Name of the Limited Liability</u> (A Florida L	imited Liability Company)	13 on our records.)		
The Articles of Organization for this Limited Liability Co	ompany were filed on	11/14/2011	and assigned	
Florida document number L11000129519	<u></u> .			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability company her	<u>re</u> :		
The new name must be distinguishable and end with the word "L.L.C."	ls "Limited Liability Compa	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:			1	
(Principal office address MUST BE A STREET ADDR	ESS)			
	······	ASS.	20	
		in-	3 m	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	
maning dadress MAT BEAT OST OTTICE BOX)		DA DA	 	
B. If amending the registered agent and/or registe	ered office address on e	our records, <u>enter t</u>	ie name of the ne	
registered agent and/or the new registered office addr	ess here:			
Name of Nov Desistand Agents				
Name of New Registered Agent:				
New Registered Office Address:	Er	uter Florida street addr	ess	
	, Florida			
	City	, Fiorida	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, <u>enter the title, name, and address of each Manager</u> or <u>Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Name Address Type of Action Title MGRM TZADIK MANAGEMENT GI 14951 ROYAL OAKS LANE, SUITE 22 Add NORTH MIAMI FL 33181 US Remove SPM STRATEGIC PROPE MGRM 6405 NW 36 STREET, SUITE 214 ☐ Add Remove MIAMI FL 33166 US MGRM 20 IRR Investments, LLC 6405 NW 36 STREET, SUITE 214 Remove MIAMI FL 33166 US Tzadik Consulting, LLC MGRM 14951 ROYAL OAKS LANE, SUITE 23 Add NORTH MIAMLEL 33181 US Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 19 2011 Dated ____ Signature of a member or authorized representative of a member Matthew Estevez Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00