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.

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To: Division of Corporations Fax Number : (850)617-6383. From: Account Name : MARKO & MAGOLNICK, P.A Account Number : 120050000185 Phone : (305)285-2000 Fax Number : (305)285-5555		14. (Alb)	DEC AM II: 4
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ETHOS PROMENADE, LLC				
(Name of the Limited Liability (A Florida L	Company as It now appears on our imited Liability Company)	records.)		
The Articles of Organization for this Limited Liability Con Florida document number <u>L12000001838</u>	mpany were filed on January 5, 2	2012 and assigned		
This amendment is submitted to amend the following:	-			
A. If amending name, enter the new name of the limite	d Hability company here:			
The new name must be distinguishable and contain the words "Limite	d Liability Company." the designation	"I I (") or the abbreviation "I I ("		
Enter new principal offices address, if applicables	,	one of the appropriation is one.		
Principal office address MUST BE A STREET ADDRE				
THE TOTAL PROPERTY AND ALL				
		n		
enter new mailing address, if applicable:		. :		
Mailing address MAY BE A POST OFFICE BOX)				
3. If amending the registered agent and/or register	ed office address on our rec	ords, enter the name of the no		
cgistered agent and/or the new registered office addres	s here:			
Name of New Registered Agent:		.`		
· · · · · · · · · · · · · · · · · · ·				
New Registered Office Address:	Enter Florida struct o	ddrae		
		Enter Florida street address		
 -	City	, Florida		
ew Registered Agent's Signature, if changing Registered A	gent;	- ,		
hereby accept the appointment as registered agent and rovisions of all statutes relative to the proper and compecept the obligations of my position as registered agenging filed to merely reflect a change in the registered company has been notified in writing of this change.	plete performance of my duties 1 as provided for in Chapter 6	s, and I am familiar with and 05. F.S. Or if this document is		
Ī	Changing Registered Agent, Signat	TIPE Of Now Penistand & Time		

305-285-5555

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

MGR = Manager AMBR = Anthorized Member

Title	Name	Address	Type of A asi
MGR	George Pappas	3001 SW 3 Avenuc	Type of Action
		Miami, Florida	□ Add
AR	Efstratios Papachristopoulos	3001 SW 3 Avenue	■ Change
		Miaral, Florida 33129 Change Remove Remove	
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