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APR - 4 2012 T. HAMPTON

COVER LETTER

Division of Co	rporations			
SUBJECT:	South Harl	oor Holdings, LLC		
SUBJECT:		ted Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
•			•	
		Marie Pizzolo		
		Name of Person		
		Torys LLP		
		Firm/Company		
	1114 Aver	ue of the Americas, 2	3rd Floor	
		Address		
	Nev	v York, New York 100	36	
		City/State and Zip Code		
	r	mpizzolo@torys.com		
	E-mail address: (to be used for future annual repo	ort notification)	
For further information	concerning this matter, please o	eall:		
N	larie Pizzolo	at (212)	880-6061	
Name	of Person	at (212) Area Code &	Daytime Telephone Nu	mber
Enclosed is a check for t	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	Certi nclosed) Certi	Filing Fee, ficate of Status & fied Copy itional copy is enclosed)
MAII	ING ADDRESS:	STREET/C	COURIER ADDRES	S:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

South	Harbor Holdings, LL	.C	
(<u>Name of the Limited Liah</u> (A Flor	oility Company as it now appe ida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liabili Florida document number	ty Company were filed on		and APR
This amendment is submitted to amend the following A. If amending name, enter the new name of the		ere:	FILED STATE OF CORPORATION -3 AM II: 5'
A. If amending name, enter the new name of the	mitted habitty company it	<u> </u>	: 55 Hoge
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Com	pany," the designation "LLC"	or the abbreviation
Enter new principal offices address, if applicables			, -,
(Principal office address MUST BE A STREET AI	DDRESS)	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2		
B. If amending the registered agent and/or registered agent and/or the new registered office a		our records, enter the n	name of the new
Name of New Registered Agent:			
New Registered Office Address: Enter Florida street address			
<u></u> -	, Florida City Zip Code		
	City	Zi	ip Code
New Registered Agent's Signature, if changing Regist	tered Agent:		
I hereby accept the appointment as registered ag	ent and agree to act in this	capacity. I further agree to	o comply with

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Richard P. Harris	P.O. Box 4458	<u></u> ✓ Add
		Greenwich, Connecticut_06831	Remove
			Add
			Remove
			Add
			Remove
			Remove
			Add
			Remove
		Add	
			Remove
D. If amen	ding any other information, e	ter change(s) here: (Attach additional sheets, if neces:	sary.)
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_			SECRE DIVISION I 12 APR
_			FILL POP OF
			AH II
	March 29	2012	
			· · ·
	Signature	falmentoer or authorized representative of a member	
		Miroslav M. Fajt	
		Typed or printed name of signee	•

Page 2 of 2

Filing Fee: \$25.00