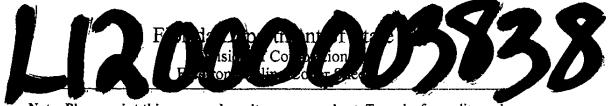
NICK SPRADLIN

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN

Phone

Account Number : I20070000020

: (813)435-3176

Fax Number

: (813)333-6358

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CRIVELLI COAST, LLC

D. BRUCE

MAY 25 2012

**EXAMINER** 

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06/02/2030 01:38 FAX 8133336358 NICK SPRADLIN

H120001388143

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CRIVELLI C	COAST, LLC	•	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on or Liability Company)	ır records.)	<del></del>
The Articles of Organization for this Limited Liability Compan	y were filed on 01.	/09/2012	and assigned
Florida document number L12000003838			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
BEACH L	IMO LLC		
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Company," the	designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:	3389 SHERIDAN S	STREET SS	スターニー
(Principal office address MUST BE A STREET ADDRESS)	SUITE 518	¥E ZZ	2
	HOLLYWOOD, FL	ORIDA 3320	ŧ [
		LO.	至即
Enter new mailing address, if applicable:	3389 SHERIDAN S	TREET 5	
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 518	<u>8</u> H	øj
·	HOLLYWOOD, FL	ORIDA 33201	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		ords, enter the	name of the new
Name of New Registered Agent:		<del></del>	<del></del>
New Registered Office Address:	77		
	Enter Flo	rida street address	5
	City	, Florida	Zip Code
	City	4	up coae

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

08/02/2030 01:39 FAX 8133336358 H12000/388/43 NICK SPRADLIN

**☑**0003/0003

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

MGR = Ma MGRM = 1	nnager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ D
<del> </del>			Remove
			Add Remove
			T Damous
D. If amen	ding any other information, enter o	change(s) here: (Attach additional s	sheets, if necessary.)  ALLAHARY SEE
	05, 24 ,	2012 .	F S ATE PRIDA
	NICKOLAS J. SPR	ember or authorized representative of a ADLIN AUTHORIZED REPRE Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00