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SELECTION SEED FLORID

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MGR= Manager

1) MGR

Title

AMBR= Authorized Member

Name

Coralee G. Penabad

Articles of Amendment to Articles of Organization of

PARADISE POINT DRIVE, LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/10/2012 and assigned Florida document number L12000004481

This amendment is submitted to amend the following:

Α.	If amending name, enter the new name of the limited liability company nere:	

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: 2100 Ponce De Leon Blvd. (Principal office address MUST BE A STREET ADDRESS) Suite 1045 Coral Gables, FL 33134 2100 Ponce De Leon Blvd. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Suite 1045 Coral Gables, FL 33134 If amending the registered agent and/or registered office address on our records, enter B. the name of the new registered agent and/or the new registered office address here: Sandra Navarro-Garcia Name of New Registered Agent: 7951 SW 40th Street, Suite 202 New Registered Office Address: Miami, FL 33155 New Registered Agent's Signature if changing Registered Agent: I hereby accept the appointment as registered agent and agree to act in this capacity. Thirther 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 605, F.S. Or, if this document is being filed 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 of Authorized Member on our records, enter the title, name, C. address of each Manager or Authorized Member being added or removed from our records:

Address

235 Altara Avenue

Coral Gables, FL 33146

Type of Action

Remove

(Check One)

Add

Tit	le_	<u>Name</u>	Address	Type of Action (Check One)				
2)	MGR	Michael Calderon	2100 Ponce De Leon Blvd. Suite 1045 Coral Gables, FL 33134					
D.	If amending any other information, enter change(s) here: (Attach additional sheet, if necessary). (Be specific)							
E.	Effective date, if other than the date of filing: (optional) (if an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b)							
Dated		14/204/						
Signa	ture	Signature is abbomber or auti	norized epresentative of a member					
			lichael Calderon					
		(i ypea or print	ed name of person signee)					

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SIGNETARY OF STATE:
FALLAHASSEE FLORIDA