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SECRETARY OF STATE
AND ASSEF, FLORID.

J. BRYAN

JUN -8 2012

EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp		•	
SUBJECT:	RC1	1605, LLC	
	Name of Limit	ed Liability Company	
The enclosed Articles of A	mendment and fec(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	<u>jU</u> ,	AN ACOSTA GUEMES Name of Person	
		Name of Ferson	BIL JUL J
		RC1605,LLC Firm/Company	—————————————————————————————————————
	485 BRIG	CKELL AVENUE, UNIT 2501	FILED PARE: 49 RECRETASSEE, FLORIDA RECRETASSEE, FL
		Address	ORIGINA 5
		MIAMI, FL 33131 City/State and Zip Code	~~~~
	jaco F-mail address: (1	esta@iskander-inc.com o be used for future annual report notifica	tion
For further information co	ncerning this matter, please c		
	COSTA GUEMES		243796
Name of	Person	Area Code & Daytime T	elephone Number
Enclosed is a check for the	e following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RC160: (<u>Name of the Limited Liability Compa</u> (A Florida Limited L	5,LLC ny as it now appear Jability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Company	were filed on	02/10/2012	and assigned		
Florida document numberL12000019959			_		
This amendment is submitted to amend the following:		7	LC Southe aboreviation		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company her	<u>'e</u> :	調えて		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compa	nny," the designation "L	LC buthe appreviation		
Enter new principal offices address, if applicable:	485 BRICKEL	L AVENUE, UNIT	2501,		
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33	131			
Enter new mailing address, if applicable:	485 BRICKEL	LAVENUE, UNIT	2501		
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33	131			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	fice address on c e:	our records, <u>enter t</u>	he name of the nev		
Name of New Registered Agent: ISKANDER.INC					
New Registered Office Address: 405 BRICKELL AVE, UNIT 2501					
	Enter Florida street address				
	11AMi	, Florida	33131		
	City		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

Page 1 of 2

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 = Manager MGRM = Managing Member							
<u>Title</u>	<u>Name</u>	Address	Type of Action				
MGR	BRUGO, JORGE	745 CRANDON BLVD, PH 8 KEY BISCAYNE FL 33449	Add Remove				
MGMR	JAP CORPORATION CV	485 BRICKELL AVENUE, UNIT 2501 MIAMI, FL 33131	Add Remove				
	-		Add Remove				
			Add Hemoving				
			Add Add Remove				
			Add Remove				
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)							
CHANGE ADDRESS MGR ACOSTA GUEMES, JUAN NEW ADDRESS 485 BRICKELL AVENUE, UNIT 2501, MIAMI FL 33131							
			_				
Dated	JUNE 1st ,	2012					
Signature of a member or authorized representative of a member							
Typed or printed name of signee							

Page 2 of 2

Filing Fee: \$25.00