## L12000042982

Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS
2012 SEP 19 PM 12: 52

C. LEWIS

SEP 2 0 2012

EXAMINER

## COVER LETTER

TO: Registration Section Division of Corporations						
* SUBJECT:	T:DIVINA MISERICORDIA, LLC  Name of Limited Liability Company					
SUBJECT:						
The enclosed Articles o	of Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	condence concerning this matter	to the following:				
	<del></del>	MANUEL A. PEREZ				
·	Name of Person					
	HARPER MEYER PEREZ HAGEN O'CONNOR ALBERT &					
	201 S B	201 S BISCAYNE BLVD SUITE 800 Address				
	n al	IANA ELODIDA 22424				
	MIAMI, FLORIDA 33131  City/State and Zip Code					
	MPEREZ@HARPERMEYER.COM  E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please c		meanon)			
МΔМ	NUEL A. PEREZ	at (_305 )	577-3443			
	of Person	Area Code & Daytin	me Telephone Number			
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Regi Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314	STREET/COUR Registration Sect Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	orations Center Circle			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE DIVISION OF CORPORATIONS

2012 SEP 19 PM 12: 52

The Articles of Organization for this Limited Liability Company were filed onMARCH 28, 2012and assigned Florida document numberL12000042982  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:  Name of New Registered Agent:	DIVINA MIS  (Name of the Limited Liability Co (A Florida Limi	ERICORDIA, Ompany as it now app ited Liability Compan	LLC pears on our records.) by)		
A. If amending name, enter the new name of the limited liability company here:  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:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:		pany were filed on _	MARCH 28, 2012	and assigned	
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:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:	This amendment is submitted to amend the following:				
"L.L.C."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:	A. If amending name, enter the new name of the limited	l liability company	<u>here</u> :		
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:	The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Co	mpany," the designation "Ll	C" or the abbreviation	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:	Enter new principal offices address, if applicable:				
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:	(Principal office address MUST BE A STREET ADDRES	<u> </u>			
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:	Enter new mailing address, if applicable:				
registered agent and/or the new registered office address here:	(Mailing address MAY BE A POST OFFICE BOX)	<del></del>			
Name of New Registered Agent:			on our records, <u>enter th</u>	ne name of the new	
	Name of New Registered Agent:				
New Registered Office Address:  Enter Florida street address					
		, Florida			
City Zip Code		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

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	PROPERTIES (BVI), INC.	201 S. BISCAYNE BLVD. SUITE 800 MIAMI, FLORIDA 33131	Add Remove				
MGR_	SANTISIMA TRINIDAD (BVI), INC.	201 S BISCAYNE BLVD SUITE 800 MIAMI, FLORIDA 33131	Add Remove				
MGR	DAVID RODRIGUEZ FREITAS	201 S BISCAYNE BLVD SUITE 800 MIAMI, FL 33131	Add Remove				
	-		Add · Remove				
	<u>.</u>		□Add □Remove				
<del>_</del>			Add Remove				
D. If amen  	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	FILED STATE SECRETARY OF STATE OIVISION OF CORFORATIONS 2012 SEP 19 PM 12: 52				
 Dated	SEPTEMBER 14 , 20	12 .	– <del>§</del> 2 ₹ –				
,	Signature of a member of a utilibrized representative of a member						
MANUEL A. PEREZ, AUTHORIZED SIGNOR OF SANTA MAGDALENA PROPERTIES (BVI), INC.							
Typed or printed name of signee							

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Filing Fee: \$25.00