

Division of Corporations

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850-249-6070  
ATTN: BUCKFlorida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H12000143305 3)))



H120001433053ABCT

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : STONE & WALDER, PL  
Account Number : I20110000075  
Phone : (863) 402-5424  
Fax Number : (863) 402-5425

MAY 29 PM 4:22

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

Office@Bellvanapr.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
IDEAL HOTSPOTS PROPERTY, LLC \*\*\*\*\*

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

B. KOHR

MAY 31 2012

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Corporate Filing Menu

Help

EXAMINER

~~H120001404773~~  
H120001433053

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

IDEAL HOTSPOTS PROPERTY, LLC

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

12 MAY 29 PM 4:22  
FILED  
CLERK OF CIRCUIT COURT  
IN AND FOR THE COUNTY OF DADE  
FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 4/5/12 and assigned  
Florida document number L12000047213

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

IDEAL HOTSPOTS PROPERTIES INV. LLC

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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

\_\_\_\_\_, Florida

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

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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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_

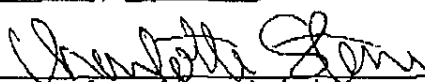
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Dated MAY 31, 2012

  
Signature of a member or authorized representative of a member.

Charlotte C. Stone, Esq.  
Typed or printed name of signee

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Filing Fee: \$25.00

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