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Tot	Division of Corporations Fax Number : (850)617-6383
From:	[
r r om:	Account Name : ALLSTATE CORPORATE SERVICES CORP Account Number : 120040000031 Phone : (800) 906-9220
	Fax Number ((800) 906-9880
annua	e email address for this business entity to be used for future 1 report mailings. Enter only one email address please.** Address:

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CRUCIANI PALM BEACH, LLC		
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SCENETARY OF STATE
FALLAHASSEE, FLORIDA.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cruciani Palm Beach lic					
(Name of the Limited Liabil) (A Florid	ty Company as II now appea	re on our records.)			
(())		ine 20, 2012			
The Articles of Organization for this Limited Liability	zation for this Limited Liability Company were filed on and assigned				
Florida document number	_ _ ·				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the li	mited liability company her	<u>.</u> e:			
The new name must be distinguishable and end with the w"L.L.C."	ords "Limited Liability Compa	iny," the designation "LL(" or the alibraviation		
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADD	RESSI				
		- !*			
Enter new malling address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>			
B. If amending the registered agent and/or registered agent and/or the new registered office ad		our records, <u>enter tho</u>	name of the new		
Name of New Registered Agent:	······································				
New Registered Office Address:			· _		
	En	ter Florida street addres	is:		
		, Florida			
	Chy		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 affice 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 Address C/o Cruciani USA 41 west 57, Fl. 5 Ali Kathami <u>Title</u> MGR Add New York, NY 10019 Remove Giuseppe Rossi c/o Cruciani USA 41 west 57, fl. 5 MGR **✓** New York, NY 10019 entove

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Brysio Cil	Signature of a member or authorized representative of a member of Esq., Secretary
<i></i>	Typed cyprinted name of signee
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