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### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

# TRUMP PALACE 3802, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:



Name of Person

Law Offices of Scott Levine, PA

Firm/Company

1555 North Park Drive, Suite102

Address

Weston, Florida 33326

City/State and Zip Code

scootslaw@msn.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

# Scott Levine

<sub>...</sub>954、709-2583

Name of Person

Area Code & Daytime 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 enclosed)

□\$60.00 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

TRUMP PALACE 3802, LLC

(Name of the Limited (A	Liability Compar Florida Limited L	ny as it now appears on our reliability Company)	ecords.)		
The Articles of Organization for this Limited Li Florida document number L12000091154	ability Company	were filed on <u>07/13/2012</u>	and assigned		
'This amendment is submitted to amend the follow	owing:				
A. If amending name, enter the new name of	the limited liabi	ility company here:			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limit	ted Liability Company," the de	signation "LLC" or the abbreviatio		
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		18101 Collins Avenue, Unit 5507			
		Sunny Isles Beach, Florida 33160			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		18101 Collins Avenue, Unit 5507 Sunny Isles Beach, Florida 33160			
B. If amending the registered agent and/or the new registered of			ds, enter the name of the nev		
Name of New Registered Agent:	Scott S. Levine, Esq.				
New Registered Office Address:	1555 North	Park Drive, Suite 102	a street address		
	Weston				
	7703011	City	Florida 33326 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, thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member <u>Title</u> <u>Name</u> <u>Address</u> **MGRM** Igor Zorin 18101 Collins Avenue, Unit 550 Sunny Isles Beach, Florida 33160 Remove MGRM SVYATOSLAV MANGUSHEV 18101 Collins Avenue, Unit 3802 Sunny Isles Beach, Florida 33160 18101 Collins Avenue, Unit 3802 MGR ANDREY MANGUSHEV Sunny Isles Beach, Florida 33160 MGR **OXANA MANGUSHEVA** 18101 Collins Avenue, Unit 3802 Sunny Isles Beach, Florida 33160 MGR ALENA MANGUSHEVA 18101 Collins Avenue, Unit 3802 Sunny Isles Beach, Florida 33160 Remove Remove

If amending the Managers or Managing Members on our records, enter the titles name, a

ddress of each Manager

D. I	f amending	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)						
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Date	June	17		. 1	2013			
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	S	cott	Levine, 🗄	sq. as A	Attorney in I	Fact for	lgor Zorin	
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					Page 3	of 3		

Filing Fee: \$25.00