## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THL 1690-906, LLC

| Certificate of Status | 0       |
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B. BOSTICK

OCT 1 0 2012

EXAM/9/2012

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

|                                                                                                                                                                                                                                                             | THL 16904                                              | 906 LLC                             |                                                |                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-------------------------------------|------------------------------------------------|--------------------------------------------|--|
| (Name of the Limited )                                                                                                                                                                                                                                      |                                                        |                                     |                                                |                                            |  |
| The Articles of Organization for this Limited Lie                                                                                                                                                                                                           | bility Company v                                       | were filed on                       | 09/05/2012                                     | and assigned                               |  |
| Florida document numberL120001135                                                                                                                                                                                                                           | 546                                                    |                                     |                                                |                                            |  |
| This amondment is submitted to amend the follow                                                                                                                                                                                                             | wing:                                                  |                                     |                                                |                                            |  |
| A. If amending name, exter the new name of                                                                                                                                                                                                                  | the limited Habil                                      | lity company be                     | <u> </u>                                       |                                            |  |
| The new name must be distinguishable and end with "L.L.C."                                                                                                                                                                                                  | the words "Limit                                       | ed Liability Comp                   | any," the designation "L                       | LC" or the abbreviation                    |  |
| Enter new principal offices address, if applicable:                                                                                                                                                                                                         |                                                        | 150 SE 2ND Avenue # 913             |                                                |                                            |  |
| Principal office address MUST BE A STREET ADDRESS                                                                                                                                                                                                           |                                                        | Miami, FL 33131                     |                                                |                                            |  |
|                                                                                                                                                                                                                                                             |                                                        | , <u> </u>                          |                                                |                                            |  |
| Enter new mailing address, if applicable:                                                                                                                                                                                                                   |                                                        | 150 SE 2ND Avenue # 913             |                                                |                                            |  |
| (Mailing address MAY BE A POST OFFICE BOX)                                                                                                                                                                                                                  |                                                        | Miami, FL 33131                     |                                                |                                            |  |
|                                                                                                                                                                                                                                                             |                                                        |                                     |                                                |                                            |  |
| B. If amouding the registered agent and/or registered agent and/or the new registered off                                                                                                                                                                   |                                                        |                                     | our records, <u>enter t</u>                    | he same of the use                         |  |
| Name of New Registered Agent:                                                                                                                                                                                                                               | Roger Speci                                            | er Speck                            |                                                |                                            |  |
| New Registered Office Address:                                                                                                                                                                                                                              | 150 SE 2ND Avenue # 913                                |                                     |                                                |                                            |  |
|                                                                                                                                                                                                                                                             |                                                        | Erner Florida street address        |                                                |                                            |  |
|                                                                                                                                                                                                                                                             |                                                        | Miami                               | , Florida                                      | 33131<br>Ztp Code                          |  |
|                                                                                                                                                                                                                                                             |                                                        | City                                |                                                | Zip Code                                   |  |
| New Registered Agent's Signature, If changing R                                                                                                                                                                                                             | egistered Agent;                                       |                                     |                                                |                                            |  |
| I hereby accept the appointment as registered<br>the provisions of all statutes relative to the pr<br>accept the obligations of my position as regist<br>heing filed to merely reflect a change in the re<br>company has been notified in writing of this c | oper and compl<br>tered agant as p<br>sgistered office | ete performanci<br>rovided for in C | e of my duties, and I p<br>Chapter 608, IS. Or | n familiar with and<br>If this document is |  |

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If Changing Registered Agent Menature 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 Title Name Address Type of Action **MGRM** The Housing League, Inc. 1119 Cotorro Ave □ Add Remove Coral Gables, FL 33146 MGRM Roger Speck ☑ Add 150 SE 2ND Avenue # 913 Remove Miami, FL 33131 Remove Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated

> Typed or printed name of signee Page 2 of 2

Signature of a member or authorized representative of a member Sandy Flick

Filing Fee: \$25,00