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(Address)				
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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	WINAMAX F	REAL ESTATE LLC		
30b0EC1		ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.		
Please return all corresp	condence concerning this matter	r to the following:		
		Maxime Rambaud		
		Name of Person		
WINAMAX REAL ESTATE LLC				
		Firm/Company		
		2 Coconut Lane		
		Address		
	Ke	ey Biscayne, FL 33149		
		City/State and Zip Code		
	Kan F-mail address: (vier@viterifinancial.com to be used for future annual report not	(fluoritiens)	
For further information	concerning this matter, please of	·	ancuncar)	
;	Xavier Viteri	at (_786)	262-1237	
	of Person	Area Code & Daytis	me Telephone Number	
Enclosed is a check for	the following amount:		•	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclose	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAII	LING ADDRESS:	STREET/COUR	RIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WINAMAX REAL ESTATE INVESTMENTS LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

09/05/2012	_ and assigned
the designation "LL.	C" or the abbreviation
records, enter the	name of the new
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Florida street addire #	
	7
, Florida	Zip Colle
Florida Signal S	Zip Ble III
	records, enter the

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** <u>Name</u> **Type of Action** <u>Address</u> **MGRM** Ralph Desens ☑ Add ☐ Remove 1428 Brickell Avenue Suite 300 Miami, FL 33131 Add Remove □ Add Remove ∏ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2012. Dated Nov OS Signature of a member or authorized representative of a member Maxime Rambaud Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00