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COVER LETTER

Division of Co	rporations			
SUBJECT:	SW 8 ST	& 160 AVE, LLC		•
SOBOLET.		ted Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
		Carmen Fanego		
		Name of Person		
		TotalBank		
		Firm/Company		
	100 \$	SE 2nd Street, 32nd Floor		
•		Address	TO E	2
		Miami, FL 33131	ECR PA	sou esp 12
		City/State and Zip Code		o :
	cfa	anego@totalbank.com		
	E-mail address: (to be used for future annual report notification	on)	4
For further information	concerning this matter, please of	call:		20 E 20
	rmen Fanego	at (S-6269 Tet	.0
Name	of Person	Area Code & Daytime Tel	ephone Number	ŕ
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 enclosed)	Section 1 Section 1 Section 2 Sectio	sed)
Regis	LING ADDRESS: tration Section	STREET/COURIER Registration Section		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

SV (<u>Name of the Limited I</u> (A I		60 AVE, LLC ny as it now appears on liability Company)	our records.)		
The Articles of Organization for this Limited Lia	bility Company	were filed on1	0/05/2012	and assigned	I
Florida document numberL120001273					
This amendment is submitted to amend the follow	ving:	·			
A. If amending name, enter the new name of	the limited liab	ility company here:			
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company,"	the designation "L	LC" or the abbrev	/iation
Enter new principal offices address, if applica	ble:	100 SE 2nd Stre	et, 32nd Floor	经	से हैं। सामग्री
(Principal office address MUST BE A STREET	ADDRESS)	Miami, FL 33131		12 288	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>0X)</u>	100 SE 2nd Stree Miami, FL 3313		PEFLINAIDA	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered offi			records, <u>enter 1</u>	the name of the	new
New Registered Office Address:	100 SE 2nd Street, 32nd Floor				
•	Enter Florida street address				
		Miami	, Florida	33131	
		City		Zip Code	
New Registered Agent's Signature, if changing Re	gistered 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 605 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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

	: Manager I = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
	·		
			Add Remove
	<u> </u>		Add Remove
			— 20 A del
			Remove 12
			Add Remove
	_		Add Remove
D. If ar	mending any other information, ento	er change(s) here: (Attach additional sheets, if necessary.)	<u> </u>
	100 SE 2nd Street, 32nd Floo		
	Miami, FL 33131		_
D I	August 12	2014	-
Dated _	August 12	$M_{\alpha} = \frac{2014}{2014}$	
	Signature of		
	-	Carmen Fånego Typed or printed name of signee .	

Page 2 of 2

Filing Fee: \$25.00