## 412000127405

(Req	uestor's Name)	
(Add	ress)	<del></del>
(Add	ress)	
(City.	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	ument Number)	1
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
-		

Office Use Only



100242254831

100242254831 01/04/13--01022--011 \*\*25.00 ·

JAN - 7 2013

T. HAMPTO:

## **COVER LETTER**

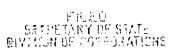
TO:	Registration Sec Division of Corp		2 · · · · · · · · · · · · · · · · · · ·	
SUBJ	ECT:	Sabal Palm Ir	ternational LLC	
		Name of Limit	led Liability Company	
The en	iclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspor	dence concerning this matter	to the following:	
		Fabi	an Castro Name of Person	<del></del>
		Grant, Herrma	nn, Schwartz & Klj Firm/Company	nger LLP
		675 Thire	d Ave 26th Floo Address	<u>r</u>
		New York	NY 10017 City/State and Zip Code	<del></del> _
		ghsk@ghs E-mail address: (t	klaw.com o be used for future annual report notifica	tion)
For fu	rther information co	ncerning this matter, please c	all:	
	Fabian Ca Name of	ASTIO Person	at ( <u>212)</u> 682–180 Area Code & Daytime T	O Telephone Number
Enclos	sed is a check for the	following amount:		
\$2:	5.00 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



13 JAN -4 AMII: 56

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, 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>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Roberto Moritz	c/o Grant, Herrmann, Schwartz & Klinger LLP 675 Third Ave 26th Floor New York, NY 10017	Add  X Remove
MGRM	O Trustees GmbH	Todistrasse 63 8002 Zurich, Switzerland	X Add Remove
MGR	Eden Hills Consulting Inc.	c/o Grant, Herrmann, Schwartz & Klinger LLP	X Add Remove
			Add Remove
			Add Remove
			Add Remove



D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated _	December 27th, 2012
	Signature of a member of authorized representative of a plember
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13.16H-4 AHII: 5