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(Re	questor's Name)	
(Ad	dress)	
,		
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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SECRETARY OF STATE

APPROVED

D. BRUCE

DEC 05 2012

EXAMINER

COVER LETTER

Division of Corp	porations		
SUBJECT:	arina Palms Name of Limit	Realty LLC ed Liability Company	<u></u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Robert	J. Garcia Name of Person	
	Marina	Palms LLC Firm/Company	
	3101	S. Ocean Dr Address	#A-1
	Hollye	Oved FL 33	3019 PALCR
	E-mail address: (to	e plaza-groupe o be used for future annual perport notificati	HASSI on)
For further information co	oncerning this matter, please ca	all:	E.FI
Robert J Name of	Person	at (<u>954) 630 - 88</u> Area Code & Daytime Te	SECRETARY OF STATE ALLAHASSEE, FLORIDA On) John Company of STATE ALLAHASSEE, FLORIDA Secretary of State and Secretary of S
Enclosed is a check for th	e 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:

TO:

Registration Section

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**

Marina Palm (Name of the Limited Liability Comp. (A Florida Limited	S Realty any as it now appears on our Liability Company)	records.)	
The Articles of Organization for this Limited Liability Compan Florida document number	y were filed on///3	2012 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Company," the	designation "LLC" or the abbreviation	on
Enter new principal offices address, if applicable:			-
(Principal office address MUST BE A STREET ADDRESS)		Z Z	<u>.</u>
Enter new mailing address, if applicable:		DEC -4 CHE JARY LAHASSE	FILE
(Mailing address MAY BE A POST OFFICE BOX)			. 50
		2: 42	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		ords, enter the name of the ne	<u>:w</u>
Name of New Registered Agent:			·
New Registered Office Address:	Futer Flor	ida street address	
	Linei 1 tori	au sii cei uuui ess	
	City	_, Florida Zip Code	•
New Registered Agent's Signature, if changing Registered Agen	•	- ,	

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>	Name	Address	Type of Action
MGR	Michael J. Internocia	3101 S. Ocean Dr	Add
		Ste-A-1	Remove
		Hollywood FL 33019	1
			Add
			Remove
			Add
			Remove
			- 12 SE
			A A A A A A A A A A A A A A A A A A A
			Remove LED
			FILED
			
			Remove
			Add
			Remove
			— —

ar	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	December 3, 2012.
	Veux Sei
	Signature of a member or authorized representative of a member
	Robert J. Garcia Typed or printed name of signee Sec Treas M
	Typed or printed name of signee Sec Tras M
	Page 3 of 3

Filing Fee: \$25.00