

Division of Corporations

Florida Department of State
Division of Corporations
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H130001051553ABCV

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : PAUL SALVER, P.A.
Account Number : I20020000087
Phone : (954) 389-1333
Fax Number : (954) 389-1397

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
EMERALD CREEK 04/05, LLC

| | |
|-----------------------|---------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
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Corporate Filing Menu

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MAY 10 2013
D. BUTLER

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

EMERALD CREEK 04/05, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/01/13
Florida document number L12000162070

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TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: PAUL SALVER, PA

New Registered Office Address: 2721 Executive Park Dr., #3

Enter Florida street address

Weston, Florida 33331

City

Zip Code

New Registered Agent's Signature, if changing Registered 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 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|---------------------------|--|--|
| MGR | ORMO SARASA, LUIS C | 2893 EXECUTIVE PARK DRIVE WESTON, FL 33331 | <input type="checkbox"/> Add |
| | | | <input checked="" type="checkbox"/> Remove |
| MGR | PINANGO DE ORMO, LESBIA M | 2893 EXECUTIVE PARK DRIVE WESTON, FL 33331 | <input type="checkbox"/> Add |
| | | | <input checked="" type="checkbox"/> Remove |
| MGR | SKOL HOLDINGS, LLC | 2893 EXECUTIVE PARK ROAD, SUITE 127 WESTON, FL 33331 | <input checked="" type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated

5/7/13

Signature of a member or authorized representative of a member

PAUL SALVER BETH. NEP
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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