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COVER LETTER

TO:	gistration Section vision of Corporations	
SUBJE	BANYAN REAL ESTATE S Name of Limited Liability Company	PARTHERS 2, LLC
SOBOL	Name of Limited Liability Company	
The anal	A Articles of Amandment and foots) one submitted for filing	
	ed Articles of Amendment and fee(s) are submitted for filing.	
Please re	n all correspondence concerning this matter to the following:	
	Michael Illett Name of Person	
	BANYAN REAL ESTAT	TE PARTNERS 2, LLC
	3309 NORTHCAKE BA	LVD #203
	PALM B RACH GARDEN.	S, FL 33403
	PALM B RACH GARDENS City/State and Zip Code michael_tillett@Pb	
	E-mail address: (to be used for future annual report	notification)
	information concerning this matter, please call:	
W	Name of Person at (56) SU 3 Area Code & Da	3-2465
	Maile of Ferson	aytime relephone Number
Enclosed	a check for the following amount:	
\$25.0	Filing Fee U\$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is encl	□\$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

BANYAN ROAL ESTATE	e PARTHERS & L	LC
(Name of the Limited Liability Con (A Florida Limite	npany as it now appears on our re ed Liability Company)	cords.)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L 13000 1118</u> 3	any were filed onl\2.	2 13 and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited in the submitted	liability company here:	A
The new name must be distinguishable and end with the words "L" L.L.C."	Limited Liability Company," the des	signation "LLC" or the abbreviatio
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	NA	
		27 m Ca
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		70 w 7 mg
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	l office address on our record <u>here</u> : リトト	s, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida	street address
 	, F City	lorida 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 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

Name	Address	Type of Action
Chloe Scott	PARTHERS & LLC 3309 NORTH LAKE BLUE Suite 203 PALM BRACH GARDENS	Remove
		Add
		Remove
		Add Remove
·····		_ Add _ Remove
		_ Add _ Remove
		Add Remove
	Chloe Scott	PARTHERS & LLC 3309 NORTH LAKE BLUE Suite 203

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
			
			
ated			
	Mulso		
	Signature of a member or authorized representative of a member		
	MICHAEL Tillett		
	Typed or printed name of signee		
	D . 2 . 62		

Page 3 of 3

Filing Fee: \$25.00