Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone Fax Number : (561)694-8107 : (561)694-1639

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TK1 SOUTH FLORIDA LLC

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Page Count	04
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B. BOSTICK

FEB 2 2 2013

EXAMINER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TK1 SQ	UTH FLORIDA LLC	
(Name of the Limited Liability (A Florida	y Company as it now appears on our record Limited Liability Company)	(s ₁)
The Articles of Organization for this Limited Liability (Company were filed on <u>UZ/14/2013</u>	and assigned
Florida document number L13000023736	<u> </u>	
This amendment is submitted to amend the following:		
A. If smending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Malling address MAY BE A POST OFFICE BOX)		
(Mating maness MAT BE A FUST OFFICE BUX)		- हे द
B. If amending the registered agent and/or registered agent and/or the new registered office add		PA Marie
	•	
Name of New Registered Agent:		
New Registered Office Address:		Jane 5
	Enter Florida str	cci address V
-	, Flor	
	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 und 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

Title	Name	Address	Type of Action
MGRM	OSTROW, JEFF M ESQ.	200 SW 1ST AVENUE	\Add
		1200	Remove
		FORT LAUDERDALE FL 33301 U	<u>s</u>
MGRM	GREGORY, DANIEL K.	200 SW 1ST AVENUE	Adó
-		1200	Removo
		FORT LAUDERDALE FL 33301 U	S
MGR	TKSF MANAGEMENT LLC	200 SW 1ST AVENUE	✓ Add
		1200	Remove
		FORT LAUDERDALE FL 33301 US	13 FEI
,			Remove
			8: 45
			Add
			Remove
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Article IV is deleted in its entirety and replaced as follows:

Article IV. The name and address of the manager is:TKSF MANAGEMENT LLC

200 SW 1ST Avenue, 1200, Fort Lauderdale FL 33301,

to serve until the earlier of its resignation, removal or replacement, as provided in it's Operating Agreement.

Dated February 21

Signature of a member or authorized representative of a member

Jeff M. Ostrow, Esq.

Typed or printed name of signee

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