

L300024201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

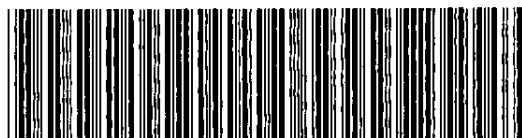
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

MAR 28 2013
G. MCLEOD



000245553770

RECEIVED
DEPARTMENT OF STATE
13 MAR 27 PM 4:12

FILED
13 MAR 27 AM 9:59
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 586580 81371A
AUTHORIZATION : *McLennan*
COST LIMIT : \$ 25.00

ORDER DATE : March 27, 2013
ORDER TIME : 3:02 PM
ORDER NO. : 586580-005
CUSTOMER NO: 81371A

DOMESTIC AMENDMENT FILING

NAME: METROPOLIS 1706, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER'S INITIALS: _____

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

METROPOLIS 1706, 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 February 14, 2013 and assigned
Florida document number L13000024201.

This amendment is submitted to amend the following:

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

TOSCANO 402S, LLC

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)

7350 SW 89th Street, Unit 402S

Miami, FL 33156

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7350 SW 89th Street, Unit 402S

Miami, FL 33156

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:

New Registered Office Address:

Enter Florida street address

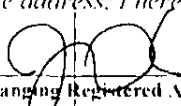
Florida

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:

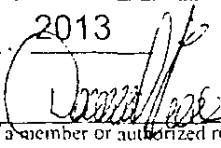
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Daniel Roca	9066 SW 73rd Court, Unit 1706	☐ Add
		Miami, FL 33156	☒ Remove
MGR	Daniel Roca	7350 SW 89th Street, Unit 402S	☒ Add
		Miami, FL 33156	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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

Dated March 25

2013


Signature of a member or authorized representative of a member

Daniel Roca

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00