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JAN 1 3 2013 T. **HAMPTON**

COVER LETTER

TO: Registration Section
Division of Corporations

CL INTERNATIONAL ART ADVISERS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Levy

Name of Person

CL International Art Advisers, LLC

Firm/Company

19500 Turnberry Way - Ste. #26A/B

Address

Aventura, FL 33180

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Levy

₃₁607, 222-4764

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

大工工工

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

CL International Art Adviser		
(Name of the Limited 1	L <mark>iability Company as it now appears on our</mark> Florida Limited Liability Company)	records.)
(A)	Florida Limited Liability Company)	- W =
The Articles of Organization for this Limited Lial	hility Company were filed on March 8, 2	
The Afficies of Organization for this Emitted Clar	binty Company were med on	allu assiglicu
Florida document number L13000035722	·	多利 6 一
This amendment is submitted to amend the follow	vina:	# m
This amendment is submitted to amend the follow	ving.	
A. If amending name, enter the new name of t	the limited liability company here:) 2: 5: 2: 5:
FINE ART FINDER LLC		· 59
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 applical	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
12 morphic office with the second of the sec		
Enter new mailing address, if applicable:	<u></u>	
(Mailing address MAY BE A POST OFFICE B	OX)	
B. If amending the registered agent and/o	wasistawad office address on our was	ands anton the name of the nov
registered agent and/or the new registered offi	•	ords, enter the name of the nev
registered agent and of the new registered on	ee adared nerv	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Flori	da street address
	2	
		, 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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			Add		
		<u> </u>	Remove		
			Add		
			Remove		
			20 4 JAdd T		
			ASSET PROMOVE		
			PH 300F		
			D) Add		
			Remove		
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			Add		
			Remove		

	formation, enter change(s) here: (Attach additional sheets, if necessary.)	
E. Effective date, it other (If an effective date is listed	an the date of filing: (optional) ne date must be specific and cannot be more than 90 days after filing.) (605.020)	7 (3)(b
Dated January 6		
	16hhli m	
	Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00

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