L13000057667

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COVER LETTER

TO:

Registration Section

Division of Corporations

SANFORD PROPERTY INVESTMENT LLC

SUBJECT

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:

GIORGIO PICINELLI

Name of Person

SOBE PROPERTIES LLC

Firm/Company

1680 MICHIGAN AVE SUITE 910

Address

MIAMI BEACH, FL 33139

City/State and Zip Code

GPICINELLI@GMAIL.COM

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

For further information concerning this matter, please call:

GIORGIO PICINELLI

305₆₇₂ 4971

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 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

SANFORD PROPERTY INVESTMENT 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 Liabi	ility Company were filed on 4/19/	2013 Pland assigned
Florida document number L13000057667	·	2013 Mand assumed ??
This amendment is submitted to amend the following	ing:	P
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Company.	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicabl	le:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our	records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter	Florida street address
_		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Regi	istered 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

MGRM = N		MGR = Manager MGRM = Managing Member					
<u> Citle</u>	Name	Address <u>T</u>	ype of Action				
MGR	SANZO DANIELA G	VIA CASORETTO 39 MILANO, IT 20131	Add Remove				
MGR	SANZO DANIELA G	VIA SCRISELLO CHIARAVALLE CENTRALE (CZ) 88064 ITALY	Add Remove				
MGR —	SANZO VINCENZO	VIA CASORETTO 39 MILANO ITALY 20139	Add Remove				
MGR	SANZO VINCENZO	VIA CASORETTO 39 MILANO ITALY 20131	Add Remove				
	-		Add Remove				

If amending any other informs	ation, enter change(s) here: (Attach additional sheets, if nec	essary.)
·········		
aed APRIL 22	2013	
[wower	gnature of a member or authorized representative of a member	
/ Sig	gnature of a member or authorized representative of a member	
SANZO VII	V CENZO	
	Typed or printed name of signee	

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Filing Fee: \$25.00