

Division of Corporations

L13 0000069142

http://www.sunbiz.org/servlet/coverSheet.exe

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000120206 3)))



H130001202063ABCP

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : PENSAM CAPITAL  
Account Number : I2C090000074  
Phone : (786) 539-4999  
Fax Number : (786) 513-0800

2013 JUN -3 AM 6:16  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: info@pensamcapital.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
PENSAM DALLAS HOLDINGS, LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$60.00

JUN - 4 2013

T CLINE

RECEIVED  
13 JUN -3 AM 6:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H13000120206

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

Pensam Dallas Holdings, 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 May 10, 2013 and assigned Florida document number L13000069142.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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

H13000170206

413000120206

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	BH Pensam STAM, LLC	777 Brickell Avenue Suite 1200	<input type="checkbox"/> Add
		Miami, FL 33131	<input checked="" type="checkbox"/> Remove
MGR	Pensam Capital, LLC	777 Brickell Avenue Suite 1200	<input checked="" type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

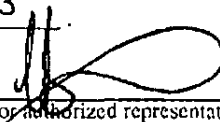
413000170706

H13000120206

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated May 31, 2013



Signature of a member or authorized representative of a member

Gavin Beekman

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 JUN -3 PM 8:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

H13000170206