Division of Corporations Electronic Filing Cover Sheet

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(((H13000187394 3)))



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Fax Number : (850)617-6383

From:

Account Name : ROTHMAN & TOBIN, P.A.

Account Number : I20000000031

Phone

: (305)895-3225

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ICONB406, LLC

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August 23, 2013

FLORIDA DEPARTMENT OF STATE Division of Corporations

ICONB406, LLC 2101 BRICKELL AVENUE APT 2203 MIAMI, FL 33129

SUBJECT: ICONB406, LLC REF: L13000108896

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Due to transmission problems, your faxed document or coversheet is illegible or incomplete. Please refax the document and cover sheet to this office for processing.

Missing page 2 of amendment.

If you have any further questions concerning your document, please call (850) 245-6051.

Tammy Hampton FAX Aud. #: H13000187394 Regulatory Specialist II Letter Number: 713A00020137

Registration/Qualification Section

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ICONB406 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 August 1, 2013 Florida document number L13000108896	and assigned
This amendment is submitted to amend the following:	ECRETARY SION OF C
A. If amending name, enter the new name of the limited liability company here:	2000 SE
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LI.L.C."	C" or the abbreviation
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 registered agent and/or the new registered office address here:	e name of the ne
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street addr	and
Enter rioriaa street adar	ยงง

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.

City

Florida

Zip Code

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>	Address	Type of Action	
			Add	
			Remove	
			Add	
			Remove	
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			_	
			Remove	

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

Please change the name of the Managing Member from

Marcio Andreazzi to

Marcio Ricardo Golfe Andreazzi

in order to include his middle names which were omitted from the original filing of the Articles of Organization

.

20 mod

Signature of a member or anthrotized representative of a monther

Marciø Rigardo Golfe Andreazzi

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00