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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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13 AUG 13 AH II: @S SECRETARY OF STATE JALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Se Division of Cor			
	int Office One, LLC		•
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Cara-Jenna Kroneng	gold, Esq.	
		Name of Person	
	Cara-Jenna Kroneng	gold, P.A.	
		Firm/Company	
	19950 W. Country C	lub Drive, Suite 900	
		Address	
	Aventura, FL 33180		
	ckronengold@nuovo	City/State and Zip Code grup.com	
	E-mail address: (to	o be used for future annual report notificat	ion)
For further information co	oncerning this matter, please ca	all:	
Cara Kronengold		305 466-1810	CALS 3
Name o		Area Code & Daytime Te	elephone Number CR AIG 13
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	■\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate Status & Certificate 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

ny as it now appears on our records.) Liability Company)
were filed on 8/2/13 and assigned
ility company here:
ted Liability Company," the designation "LLC" or the abbreviation
SETICP. Stem, Esq.
1820 N.E. 163rd Street, Stc 100
North Miami Ben, FL 33162
& Eric P. Stein, Esq.
1820 N.E. 163rd Street, Ste. 100
North Miomi Ben, FL 33162
fice address on our records, enter the name of the new
e: ALLAHAS 1

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Enter Florida street addres.

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
MGR	Elias Amkie Levy	19950 W. Country Club Drive, Ste 900	Add
		. Aventura, FL 33180	Remove
MGR	Elias Cababie Daniel	19950 W. Country Club Drive, Ste 900	Add
		Aventura, FL 33180	Remove
MGR Abraham Cababie	Abraham Cababie Daniel	19950 W. Country Club Drive, Ste 900	Add
		Aventura, FL 33180	Remove
MGR Jaime Dayan Tawil	Jaime Dayan Tawil	19950 W. Country Club Drive, Ste 900	— Add
		Aventura, FL 33180	Remove
MGR	Paramount C-301,11	No. & Eric P. Stein Feats	
Teremount Casi,	, <u> </u>	1820 N.E. 163rd Street Scite 100	
		North Miami Beach, FL 33	1705
			Remove

D. II ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	•
_	· · · · · · · · · · · · · · · · · · ·
_	
– Dated	August 9, 2013
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

13 AUG 13 AM II: 05
SECRETARY OF STATE