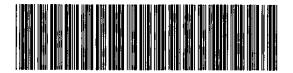
## 113000117813

(Requestor's Name)
pecial Instructions to Filing Officer:
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## **COVER LETTER**

TC	D: Registration Sec Division of Corp	
	Wasabi S	LS, LLC
SU	ВЈЕСТ:	Name of Limited Liability Company
Th	e enclosed Articles of A	mendment and fee(s) are submitted for filing.
Ple	ase return all correspon	dence concerning this matter to the following:
		Danielle Blankstein
		Name of Person
		Lisa Pearson, P.A.
		Firm/Company
		1111 Lincoln Road, #400
		Address
		Miami Beach, FL 33139
		City/State and Zip Code Danielle@lisapearsonpa.com
		E-mail address: (to be used for future annual report notification)
Fo	r further information cor	ncerning this matter, please call:
D	anielle Blankstein	305 866-8655 at()
	Name of I	
En	closed is a check for the	following amount:
	\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 18, 2014

DANIELLE BLANKSTEIN 1111 LINCOLN ROAD #400 MIAMI BEACH, FL 33139

SUBJECT: WASABI SLS, LLC Ref. Number: L13000117813

We have received your document for WASABI SLS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tim Burch Regulatory Specialist II

Letter Number: 714A00013210

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wasabi Real Estate Holdings, LLC

company has been notified in writing of this change.

(Name of the Limit	ed Liability Compa (A Florida Limited I	ny as it now appears on our re Liability Company)	cords.)
The Articles of Organization for this Limited Li Elorida document number  This amendment is submitted to amend the followard.  If amending name, enter the new name of	owing:		and assigned
The new name must be distinguishable and end with the	words "Limited Liab	oility Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	% Lisa Pearson, P.A	ı.
(Principal office address MUST BE A STREE	T ADDRESS)	1111 Lincoln Road,	
		Miami Beach, FL 33	139
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	% Lisa Pearson, P.A 1111 Lincoln Road, a Miami Beach, FL 33	#400
B. If amending the registered agent and/ registered agent and/or the new registered of			ords, enter the name of the ne
Name of New Registered Agent:	Lisa Pearso	on, P.A.	
New Registered Office Address:	1111 Lincolr	n Road, #400	
New Adgistered Office Address.		Enter Florida street aa	
	Miami Beach		, Florida 33139  Zip Code
		City	Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:		
I hereby accept the appointment as registere provisions of all statutes relative to the prop- accept the obligations of my position as regi- being filed to merely reflect a change in the	er and complete stered agent as j	performance of my duties provided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is

If Charging Registered Agent, Signature of New Registered Agent

Page 1 of 3

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				
			Remove				
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e effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after e date this document is filed by the Florida Department of State)		·
e effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after e date this document is filed by the Florida Department of State)	·	(in
	- ;	7 54 5
Ald FT	;	, n
Signature of a member or authorized representative of a member  ALDO SPAGNOLI FOR WASABI REALESTATE H	DIA(N)	۷ <b>،</b> ۲

Page 3 of 3

Filing Fee: \$25.00