13000138795

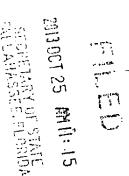
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

1000 NW 9th Court

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:

Spencer B. Siegel, Esq

Name of Person

Siegel Siegel & Wright

Firm/Company

1600 South Dixie Hwy Suite 300

Address

Boca Raton, FL 33432

City/State and Zip Code

sbsiegel@teamsiegel.com

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

For further information concerning this matter, please call:

Spencer B. Siegel

561 620 8200

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

| 1000 NW 9th Court LLC | 724 0 | |
|--|--|--------------------------------------|
| (Name of the Limited Lian (A Flor | oility Company as it now appears on our reida Limited Liability Company) | ecoras.) |
| The Articles of Organization for this Limited Liabili Florida document number L13000138795 | ty Company were filed on 10/10/201 | 3 and assigned |
| This amendment is submitted to amend the following | g: | |
| A. If amending name, enter the new name of the | limited liability company here: | |
| Red Martini LLC | | |
| The new name must be distinguishable and end with the "L.L.C." | words "Limited Liability Company," the de | signation "LLC" or the abbreviation |
| Enter new principal offices address, if applicable | <u> </u> | |
| (Principal office address MUST BE A STREET Al | DDRESS) | 20 0 |
| | | AP 6 |
| | | 25 158 |
| Enter new mailing address, if applicable: | | Ro I |
| (Mailing address MAY BE A POST OFFICE BOX | <u> </u> | |
| · · · · · · · · · · · · · · · · · · · | | 원 - |
| | | 7.1 |
| B. If amending the registered agent and/or re registered agent and/or the new registered office | | ds, <u>enter the name of the new</u> |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida | a 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

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 | |
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| D. If amend | ing any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| _ | 0040 |
| Dated OC1 | tober 21 2013 _ |
| | Dela S Siesel |
| | Signature of a member or authorized representative of a member |
| | CORI KASTEN, Managing Member |
| | Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE