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(Re	questor's Name)	
(Add	dress)	· · · · · · · · · · · · · · · · · · ·
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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w. Zalloz

COVER LETTER

TC: Registration Section Division of Corporations	
SUBJECT: 3328 N. Miami Ave LLC	
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:	
Andrew McDermott Name of Person	
Gebret Proporties LLC	
Firm/Company	
1135 Kane Concourse 4th Floor Address	······································
Boy Harber Islands, FL 3 City/State and Zip Code	3154
Roy Harber Islands, FL 3 City/State and Zip Code Andrew of Genrel Investment & C E-mail address: (to be used for future annual report n	Om Distribution Di
For further information concerning this matter, please call:	AON SEE
Andrew McDernott at (215) 964-2 Name of Person Area Code & Day	ytime Telephone Number
	ytime Telephone Number
Enclosed is a check for the following amount:	~ ~ ~ ~
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$\$ \$Certificate of Status\$\$ \$Certificate of Status\$\$ \$Certified Copy (additional copy is enclosed)	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

3328 N Miani	Ave LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on cited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Com	pany were filed on <i>[0/2.6</i>	17013	and assigned
Florida document number <u>L 13000 148 700</u> .			-
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	l liability company here:		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," t	he designation "LLC"	' or the abbreviation
Enter new principal offices address, if applicable:		par med	
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>	P :3	20 20 20 20 20 20 20 20 20 20 20 20 20 2
		>	<u>*</u>
			N Gramma
Enter new mailing address, if applicable:		ori≤ maco	വ [
(Mailing address MAY BE A POST OFFICE BOX)		前 前 こむ	_ (4.74)
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		3 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ecords, <u>enter the</u>	name of the nev
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Fl	orida street address	•
**************************************		, Florida	
	City	Ź	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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Andrew J Mc Dermott	1135 Kape Corrowser, 44h	Add
		Bay Harber Islands, FC	Remove
		33154	
MGR	Andrew J McDermott	1135 Kane Concourse 4th	X Add
		Buy Harber Islands, FL	Remove
		33154	<u></u>
 		 	Add
			Remove
		<u>بر</u> بری	VON BISS
-			Add
		0219 A	Remove
		<u></u>	Add
			Remove
			_ <u>_</u>
			Add
			Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•,	
•	
Dated	November 22, 2013.
	1 MA
	Signature of a member or authorized representative of a member
	Andrew J. Mc) const Typed or printed name of signee
	i yped or printed name of signee

Page 3 of 3

Filing Fee: \$25.00