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SECRETARY OF STATE
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OSHINSKY LAW

April 8, 2014

VIA FEDEX

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circles
Talahassee, FL 32301

Dear Sir/Madam:

Enclosed please find an executed copy of the Articles of Amendment to the Articles of Organization of Barre 163 LLC. The purposes of this amendment is to change the company's name and registered agent.

Also enclosed is a check in the amount of \$60.00 made payable to the Florida Department of State in payment of the requisite filing and other fees.

Please feel free to contact me if you have any questions regarding the foregoing or otherwise. My pertinent contact information is set forth below.

Thank you in advance for your prompt consideration of the foregoing,

Sincerely

Jeffyey M. Oshinsky

2014 APR -9 EM (Z) 0

COVER LETTER

Division of Corporations	
Barre 163 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:	
Jeffrey M. Oshinsky, Esq.	
Name of Person	•
Jeffrey M. Oshinsky, P.A.	
Firm/Company	•
20900 NE 30th Avenue, #600	
Address	-
Aventura, FL 33180	2014 APR -9 FH 12: 03 SECRETARY OF STATE TALLAHASSEE, FLORID
City/State and Zip Code	· 在
jeff@oshinskylaw.com E-mail address: (to be used for future annual report notification)	ARY SSS
For further information concerning this matter, please call:	
	STATE OF
Jeffrey M. Oshinsky, Esq. at (305) 466-1131 Name of Person Area Code Daytime Telephone Number	**
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified	te of Status &

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**

Barre 163 LLC			
(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Compan	ears on our records.) y)	
The Articles of Organization for this Limited I		February 6, 2014	and assigned
Florida document number L14000021093	·•		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability company	here:	
Pulse 163, LLC			
The new name must be distinguishable and end with the	e words "Limited Liability Company," i	the designation "LLC" or the a	obreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE.	ET ADDRESS)		
		3	2 0 1 1 1 1 1 1 1 1 1 1
			PR PR
Enter new mailing address, if applicable:			TARR ASS
(Mailing address MAY BE A POST OFFICE			
* ***			F 5 5 0
		· · · · · · · · · · · · · · · · · · ·	DE CO.
B. If amending the registered agent and	\$.**	on our records, enter	က မာ the name of the nev
registered agent and/or the new registered (office address here:		
	Inffraga M. Cabinalas D	A	
Name of New Registered Agent:	Jeffrey M. Oshinsky, P.	.A.	
New Registered Office Address:	New Registered Office Address: 20900 NE 30th Avenue, Suite 600		
•	Enter F	Florida street address	
	Aventura	, Florida <u>3</u> 3	180
	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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I bereby confirm that the limited liability company has been notified in writing of this change.

> If Changing Registered Afger t, Signature

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address .	Type of Action
			Add
			□ Remove
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D.	If ame	ending any other information, enter change(s) here:	(Attach additional sheets, if necessary.)
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E.	(The effe	ive date, if other than the date of filing: ective date must be specific, cannot be prior to date of receipt or file this document is filed by the Florida Department of State)	(optional) d date and cannot be more than 90 days after
	Dated	April 8 2014	
		Signature of a member of authori	zed representative of a member
		Jeffrey M. Øshinsky	name of signee

Page 3 of 3

Filing Fee: \$25.00

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