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SECRETARY OF STATE

D. BRUCE DEC 2 0 2016

COVER LETTER

TO: Registration S Division of Co	ection porations				
	sset Management XXIII. LLC				
SUBJECT:	Name of Limited Li	ability Company			
	Amendment and fee(s) are submitted ondence concerning this matter to the	_			
	Michael Hornstein			,	
	· · · · · · · · · · · · · · · · · · ·	Name of Person			
	Brickell Asset Management, LL	С			
		Firm/Company			
100 Southeast Second Street, Suite 3350					
		Address			
	Miami, Florida 33131			; -1	
·	•	y/State and Zip Code		2016 SEC ALL	
	mhornstein@brickellam.com E-mail address: (to be u	used for future annual report notifi	cation)	AHA AHA	
For further information	concerning this matter, please call:	,		2016 DEC 19 SECNETARY LLAHASSEE	
Mike Hornstein		305 995-5334		PES D	
Name	of Person		Telephone Number	2: 47	
Enclosed is a check for	he following amount:		,		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ Certificate of Status	\$55.00 Filing Fee & Certified Copy (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

Brickell Asset Management XXIII, LLC			
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our recorded Liability Company)	<u>ds.</u>)	
The Articles of Organization for this Limited Liability Compa	ny were filed on February 10, 201	14	_ and assigned
Florida document number L14000023118			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLo	C" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			 _
(Principal office address MUST BE A STREET ADDRESS)			
		Æ£	2016
Enter new mailing address, if applicable:		A C	
(Mailing address MAY BE A POST OFFICE BOX)		ASSE	
			_ ا و
		ا الله الله	ם יוו
B. If amending the registered agent and/or registered			
registered agent and/or the new registered office address h	iere:	Drs A	그 在
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street addre	ess	
	, F	lorida	
	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 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	Francis A. Anania	100 SE Second Street, Suite 3350	≅ Add
		Miami Florida, 33131	□ Remove
			Change
MGR	Anthony La Forgia	100 SE Second Street, Suite 3350	Add
		Miami Florida	□ Remove
			Change
AMBR	Francis A. Anania	100 SE Second Street, Suite 3350	Add
		Miami, Florida 33131	Remove
	·		A Change
AMBR	Anthony La Forgia	100 SE Second Street, Suite 3350	SS A
		Miami, Florida 33131	Regnove O
			D Change
			□ Add
			☐ Remove
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Effective date, if other than the date must be	ate of filing: e specific and cannot be p	rior to date of filing or	more than 90 days after f	ial) iling.) Pursuant to	605.0207
Note: If the date inserted in this block document's effective date on the Department.	k does not meet the app	dicable statutory fill	ing requirements, this	date will not be	listed as t
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e record specifies a delayed e		not an effective	time, at 12:01 a.	m. of the ea	idier of
The 90th day after the recor	d is filed.			ASS ASS	ء الات - الات
December 15	2016	_			o I
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Filing Fee: \$25.00