## 400330

(Requ	estor's Name)	·
(Addre	ess)	
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(City/s	State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Name)	
(Docu	ıment Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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SUFFICIENCY OF FILING
TO ACKNOWLEGGE
TO ACKNOWLEGGE
TO ACKNOWLEGGE

FILED 5 MAR 24 FH 12: 27

MAR 2 5 2015 S. YOUNG CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 561549 4335360

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: March 24, 2015

ORDER TIME : 3:07 PM

ORDER NO. : 561549-010

CUSTOMER NO: 4335360

## DOMESTIC AMENDMENT FILING

NAME: SOUTH POINTE PROPERTY FUND LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

## **COVER LETTER**

TO: Registration Security Division of Corp.				
South Po	ointe Property Fund LL	C		
SUBJECT:	Name of Lin	rited Liability Company	The second secon	
The enclosed Articles of A	Amendment and fcc(s) are sub	emitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Davor Zgaljic			
		Name of Person	**************************************	
	SPO Capital LLC			
		Firm/Company		
	1000 Fifth St., Ste.	200-P2		
		Address		TO TO
	Miami Beach, FL 33	3139		
		City/State and Zip Code		ラララー
	davor.z@gmail.com	to be used for future annual report notifica	tion)	
For further information co	oncerning this matter, please o		,	STATES OF THE 27
Davor Zgaljic		786 456-4759		高市 2
Name of	Person	Area Code Daytime To	elephone Number	ALTO MILITARY INSTITUTE OF THE STATE OF THE
Enclosed is a check for th	c following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &

MAILING ADDRESS:

· ...

Registration Section Division of Corporations P.O. Box 6327 Tullahassee, 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

South Pointe Property Fund LLC		
(Name of the Limited Liability Compa (A Florida Limited I	nv as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number L14000030301  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liab	were filed on February 21, 2014	and assigned
The new name must be distinguishable and end with the words "Limited Liab	nility Company," the designation "LLC" or ti	
Enter new principal offices address, if applicable:	1000 Fifth St.	
(Principal office address MUST BE A STREET ADDRESS)	Ste. 200-P2	学的第二
	Miami Beach, FL 33139	225 25 5
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1000 Fifth St. Ste. 200-P2	
(Mulling address MAT BE A FOST OF TICE BOX)	Miami Beach, FL 33139	, ,
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
with and the land and the state of the state	, Florida	Zto Code
	Cay	engrance.

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 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

Name	Address	Type of Action
SPO Capital LLC	1000 Fifth St., Ste. 200-P2	<b>W</b> Add
	Miami Beach, FL 33139	Remove
South Pointe Capital LLC	400 S. Pointe Dr., Apt 2408	
	Miami Beach, FL 33139	■ Remove
		SECTOTAL ROMENTS TATE Add
		□ Add
	SPO Capital LLC	SPO Capital LLC  1000 Fifth St., Ste. 200-P2  Miami Beach, FL 33139  South Pointe Capital LLC  400 S. Pointe Dr., Apt 2408

ffective date, if other than the date of filing:	amending any other informat	ion, enter change(s) here: (Attach	additional sheets, if necessary.)
he effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)  ated  March  2015  Signature of a member or authorized representative of a member			
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he date this document is filed by the Florida Department of State)  ated   March 2 4 2015  Signature of a member or authorized representative of a member	Effective date, if other than the	date of filing:	
Signature of a member or authorized representative of a member			cannot be more than 90 days after
Signature of a member or authorized representative of a member	March 24	2015	
	raicu	7	
	and	[M][]	
Dávor Zgaljic / /		Signature of a menther or authorized repres	entative of a member
Tyried or printed name of stence	Dáyor Zoaliic	/ /	

Page 3 of 3

Filing Fee: \$25.00

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