Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000213575 3)))



H150002135753ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Tot

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : SNYDER GROISMAN P.A.

Account Number : I20120000060 Phone

: (786)899-2880

Fax Number

: (786)899-2890

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Melissa @ snyder aroisman. com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BAY HARBOR TH 1 LLC**

Certificate of Status Certified Copy Page Count 01 Estimated Charge \$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

FILED

2015 SEP -3 AM 10: 26

SECRETARY OF STATE
FALLAHASSEE, FLORID

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF BAY HARBOR TH 1 LLC

FIRST:

The date of filing of the Articles of Organization of BAY HARBOR TH 1 LLC was March 18,

2014 and assigned Florida document number L14000045285.

SECOND:

The following amendment(s) to the Articles of Organization of BAY HARBOR TH 1 LLC

was/were adopted by the limited liability company:

"RESOLVED, that Article III shall be amended to read as follows:

The principal address and mailing address of the Company is amended as follows:

20900 NE 30th Ave, Suite 510 Aventura, FL 33180

"RESOLVED, that Article IV shall be amended to read as follows:

The name and street address of the registered agent is:

Snyder Groisman P.A. 21500 Biscayne Boulevard, Suite 401 Aventura, FL 33180

"RESOLVED, that Article V shall be amended to change the managers' addresses as follows:

Tomas Katz 20900 NE 30th Ave, Suite 510 Aventura, FL 33180

Michel Leibovich 20900 NE 30th Ave, Suite 510 Aventura, FL 33180

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.

DATED this 2nd day of September, 2015.

If Changing Registered Agent, Signature of New Registered

Agent

Signature of a member or authorized representative

of a member

Melissa Groisman, authorized representative Typed or printed name of signee