# 114000059779

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### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 15, 2014

AARON RESNICK 100 N BISCAYNE BLVD SUITE 1607 MIAMI, FL 33132

SUBJECT: HYDE BEACH RESORT 205, LLC

Ref. Number: L14000059779

We have received your document for HYDE BEACH RESORT 205, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

Letter Number: 514A00015150

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#### **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: HYDE BEACH RESORT 205, 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:

Aaron Resnick				
Name of Person				
Firm/Company				
100 N. Biscayne BLVD, Suite 1607				
Address				
Miami, FL 33132				
City/State and Zip Code				
aresnick@thefirmmiami.com				
E-mail address: (to be used for future annual report notification)				

For further information concerning this matter, please call:

Aaron Resnick		<sub>at</sub> 305, 672-7495	
Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fe Certified Copy (additional copy is	Certificate 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

## HYDE BEACH RESORT 205, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

ζ	- initial control company,	
The Articles of Organization for this Limited Liab	ility Company were filed on 04/11/2014	and assigned
Florida document number L14000059779	mily company were med on	und abs.prea
Florida document number	·	
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
SANTAMARIA USA RESORT, LLC	•	
The new name must be distinguishable and end with the wor	rds "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET.		
Trincipul office unuress most be A STREET	ADDRESS)	
Enter new mailing address, if applicable:		111111111111111111111111111111111111111
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
P. If amanding the registered exert and/on	understand office address on our uncountry	autou the name of the nam
B. If amending the registered agent and/or registered agent and/or the new registered offic		enter the name of the new
Name of New Registered Agent:		
<u> </u>		CZZ
New Registered Office Address:	Enter Florida street address	17
		agent of the same
	, Flor	ida 💮 🙃
	City	ida Zip Code,
New Registered Agent's Signature, if changing Reg	cistered Agent:	ტე ლე
I hereby accept the appointment as registered of		
provisions of all statutes relative to the proper accept the obligations of my position as registe		
being filed to merely reflect a change in the reg		
company has been notified in writing of this ch		

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

No	4.44	Town of Aution
<u>Name</u>	Address	Type of Action
		□ Add
		□ Remove
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		Remove
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	Name	

· · · · · · · · · · · · · · · · · · ·		onal sheets, if necessary.)
E. Effective date, if other than the (The effective date must be specific, can the date this document is filed by the F	not be prior to date of receipt or filed date and cannot b	(optional) be more than 90 days after
are date and document is med try are i	nonda Department of State)	
Dated July 11	2014 .	
•	2014	
Dated July 11	Signature of a member or authorized representative	terrer in fact

Page 3 of 3

Filing Fee: \$25.00