#L14000077322

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K. SALY EXAMINER

JUL 1 5 2014

COVER LETTER

TO: Registration Section Division of Corpor	n ations		
FDG	BRICKELL	LLC.	
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of Am	endment and fee(s) are subm	nitted for filing.	
Please return all corresponde	nce concerning this matter to	o the following:	
	LUIGI RA	NIERI	
•		Name of Person	
	FDG BRIG	CKELL LLC.	
		Firm/Company	
	11890 S\	W 8 STREET	STE.202
		Address	10
	MIAMI, I	FL 33184	
	-:41	City/State and Zip Code	
_	nithapereyra@ E-mail address: (to	notman.com be used for future annual report	notification)
For further information conc	·	•	
	-		0610
ANDREA F		$\frac{1}{2}$ at $\frac{786}{2}$ $\frac{262}{2}$	vtime Telephone Number
Name of Pe	rson	Area Code Day	ytime rerephone Number
Enclosed is a check for the fo	ollowing amount:		
■ \$25.00 Filing Fee I	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

FILED	
2014 JUL 14 PM 1: 35	
CLIANTARY DE ON	

Zip Code

FDG BRICKELL LLC.	as it now appears on our records	TAHASSEE, FLORID,
(Name of the Limited Liability Company (A Florida Limited Liab	pility Company)	TOSEE, FLORING
The Articles of Organization for this Limited Liability Company we Florida document number <u>L14000077322</u> .	ere filed on05/13/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	y company here:	
N/A		
The new name must be distinguishable and end with the words "Limited Liabilit	y Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	N/A	
Enter new mailing address, if applicable:		,
(Mailing address MAY BE A POST OFFICE BOX)	N/A	to the second se
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, <u>ente</u>	r the name of the nev
Name of New Registered Agent:	N/A	
New Registered Office Address:	Enter Florida street address	
	Florida	

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.

City

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 **Address Type of Action Title** Name 6355 NW 36 ST STE.401 **MBR BB HOLDINGS LLC** □ Add VIRGINIA GARDENS, FL 33166 **■** Remove 6355 NW 36 ST STE.401 **MBR BB HOLDING LLC ■** Add VIRGINIA GARDENS, FL 33166 ☐ Remove □ Add □ Remove _□ Add ☐ Add ☐ Remove

•	,	
	N/A	
ve date, if other than	the date of filing:	(optional)
	the date of filing: cannot be prior to date of receipt or filed date and can he Florida Department of State)	(optional) not be more than 90 days after
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Filing Fee: \$25.00