114000/65380

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
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ACCOUNT NO. : 12000000195

REFERENCE : 357401 4306525

AUTHORIZATION

COST LIMIT

ORDER DATE: October 30, 2014

ORDER TIME : 11:12 AM

ORDER NO. : 357401-015

CUSTOMER NO: 4306525

DOMESTIC AMENDMENT FILING

NAME: INN ON THE BEACH, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

COVER LETTER

| Division of Cor | | | | |
|-----------------------------|---|---|---|----------|
| Inn on th | ie Beach, LLC | | | |
| SUBJECT: | Name of Lim | ited Liability Company | | |
| | | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please return all correspo | ndence concerning this matter | to the following: | | |
| | Michael A. Goldsteir | n, Esq. | ; 1' | 2010 |
| | | Name of Person | | |
| | Sills Cummis & Gros | ss P.C. | • | |
| | | Firm/Company | | <u> </u> |
| | One Riverfront Plaza | a, 13th Floor | | |
| | | Address | | |
| | Newark, NJ 07102 | | | |
| | | City/State and Zip Code | | |
| | mgoldstein@sillscum | nmis.com to be used for future annual report notif | | |
| For further information of | oncerning this matter, please of | · | caron) | |
| Michael A. Goldste | in, Esq. | 973 643-6589 | | |
| Name of | f Person | Area Code Deytime | Telephone Number | |
| Enclosed is a check for the | ne following amount: | | | |
| \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Sta Certified Copy (additional copy is ea | ms & |
| | ING ADDRESS: | STREET/COURD Registration Section | | |

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | OF | 72 Z |
|---|--|---|
| Inn on the Beach, LLC | | SECRETARIO |
| | | |
| (Name of the Limit | ed Liability Company as it now appear (A Florida Limited Liability Company) | 1 00 our records.) |
| The Articles of Organization for this Limited Li | ability Company were filed on Oc | ctober 23, 2014 and assigned |
| Florida document number L14000165380 | · | 90 |
| This amendment is submitted to amend the following | owing: | |
| A. If amending name, enter the new name of | the limited liability company be | <u>re</u> : |
| The new name must be distinguishable and end with the | words "Limited Liability Company," the o | designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applic | able: | |
| (Principal office address MUST BE A STREE | T ADDRESS) | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE) | <u></u> | |
| B. If amending the registered agent and/ registered agent and/or the new registered of | | |
| Name of New Registered Agent: | | Airy |
| New Registered Office Address: | 1201 Hays Street | |
| | | ida street address |
| | Tallahassee | , Florida 32301 |
| New Registered Agent's Signature, if changing R | | Zip Code |
| I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registed being filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing the company has been notified in the company | er and complete performance of instered agent as provided for in Coregistered office address, I hereby change. | my duties, and I am familiar with and Chapter 605, F.S. Or, if this document is |

Page 1 of 3

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

| <u>Title</u> | Name | Address | Type of Action |
|--------------|----------------------------|----------------------------------|-----------------|
| MGR | Craig Michaelson | 225 West 34th Street, Suite 1513 | D Add |
| | | New York, NY 10122 | Remove |
| MGR | Giordano Pozzi | 225 West 34th Street, Suite 1513 | □ Add |
| | | New York, NY 10122 | ™ Remove |
| MGR | Jon Daou | 1133 1/2 Bay Street NE | [] Add |
| | | St. Petersburg, FL 33701 | Remove |
| MGR | Mulberry Green Corporation | 225 West 34th Street, Suite 1513 | = Add |
| | | New York, NY 10122 | □ Remove |
| | | | D'Àdd 😂 |
| | | <u></u> | DAdd 2014 UC 30 |
| | | | |
| | | | Remove |
| | | | |

| Đ. | If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|----|---|
| | |
| | |
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| | |
| | |
| E. | Effective date, if other than the date of filing: (optional) (The 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) |
| | Dated October 29 . 2014 |
| | Signature of a member or authorized representative of a member |
| | Craig Michaelson, authorized representative |
| | Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00

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