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COVER LETTER

TO:	Registration Sec Division of Corp				
enn in		la Fund Manager LLC			
Name of Limited Liability Company					
l he en	closed Articles of A	Amendment and fee(s) are subr	nitted for filing.		
Please	return all correspon	ndence concerning this matter (o the following:		
		Jeannette Brandt			
			Name of Person		
Firm/Company					
		81 Washington Ave Suite 3			
			Address		
		Miami Beach Florida 3313	9		
			City/State and Zip Code		
. '		Jeannette.Brandt@villazzo.		and the same of th	
			to be used for future annual report notifi	cation)	
For fur	ther information of	oncerning this matter, please ca	all:		
Jeanne	ette Brandt		305 926-5565 at ()		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclos	ed is a check for th	ne following amount:			
\$ 2	5.00 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 Status & Certified Copy (additional copy is enclosed)	

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

TO:

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

Villazzo Villa Fund Manager LLC				
(<u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on a a Limited Liability Company)	ur records.)		
The Articles of Organization for this Limited Liability (Company were filed on 01-05-2	015	and assigned	
Florida document number L15000001995	·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	nited liability company here:			
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designa	ation "LLC" or the ab	breviation "L.L.C."	
Enter new principal offices address, if applicable:				,
(Principal office address MUST BE A STREET ADD	RESS)			
Enter new mailing address, if applicable:			5	_
(Mailing address MAY BE A POST OFFICE BOX)				-
			- 5 5	-
		_	်ကို ကား	
B. If amending the registered agent and/or registered agent and/or the new registered office ade	istered office address on our dress here:	r records, <u>enter</u>	the name of the	# ; ••••••
				econo.
Name of New Registered Agent:				•
New Registered Office Address:				_
	Emer Florida s	treet uddress		
·	City	, Florida	Zip Code	-
	c ar		mp com	

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Jeannette Brandt	81 Washington Ave 3 floor	Add
		33139 Miami Beach Florida	■ Remove
			Change
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Tective date, if other than the an effective date is listed, the date must	date of filing: _	nnot be prior to	are of filing or mor	c than 90 days after fili	ng.) Pursuant to	 6 05/ 0207
ote: If the date inserted in this blo ocument's effective date on the De	ock does not mee	t the applicabl	e statutory filing	requirements, this da	ite will not be l	isted as
current a effective date on the De	partment of State	e s records.				
record specifies a delayed	effective dat	e, but not a	n effectiv e tir	ne. at 12:01 a.n	n, on the ea	rlier o
The 90th day after the reco				,		
		2016				
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ated August 5	· / (1)	, HH.	Ara	1. 1		
ated August 5	Signature of a me	A Authori	ud representative	And Harl		

Page 3 of 3

Filing Fee: \$25.00