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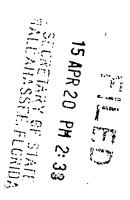
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## **COVER LETTER**

TO: Registration Division of C			
Alcaza	ar Development Group, LL	.C.	
SUBJECT:	Name of Lim	ited Liability Company	····
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
	Jose Luis Machado,	Esq.	
		Name of Person	<del></del>
	Law Offices of Mach	nado & Herran, P.A.	
		Firm/Company	
	8500 S.W. 8th Stree	et, Suite 238	
		Address	
	Miami, Florida 3314	4	
		City/State and Zip Code	
	jose@machadolaw.c		
		to be used for future annual report notifi	cation)
For further information	n concerning this matter, please ca	alli:	
Jose Luis Macha	ado, Esq.	305 261-5355	
Nam	e of Person	Area Code Daytime	Telephone Number
Enclosed is a check fo	r the 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 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 ARTICLES OF ORGANIZATION **OF**

Alcazar Development Group, LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on February 6, 2015 and assigned	ed :
Florida document number L15000023096	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
<del></del>	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<del></del>
B. If amending the registered agent and/or registered office address on our records, enter the name of	the nev
registered agent and/or the new registered office address here:	
APR APR	
Name of New Registered Agent:	* [
New Registered Office Address:	Tong MERIAM
Enter Florida street address	
. Florida $\stackrel{\sim}{\sim}\stackrel{\sim}{\sim}\stackrel{\sim}{\sim}$	C TENNER
City Zip Code	
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 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>	<u>Name</u>	Address	Type of Action
MGR	JANO Holdings II, LLC.	2103 S.W. 22 Street	<b>■</b> Add
		Suite 306	□ Remove
		Miami, Florida 33145	
MGR	Cicera Group, LLC.	901 Ponce De Leon Boulevard	<b>A</b> dd
		Suite 305	☐ Remove
		Coral Gables, Florida 33134	
			Add
			□ Remove
			<del></del>
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			P Remove
			STO R IT
			1000 PM
			□ Remove
			□ Remove
		;	

If	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	•
Eff (The	fective date, if other than the date of filing:
Da	ated April 16 2015
150	
	Signature of a member or authorized representative of a member
	Jorge Figueroa, Manager of RRG at Veranda, LLC.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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SEGRETARY OF STATE
TATE A MARKSTER CLASSE