## L/50004528

(F	Requestor's Name)	
(/	Address)	
(/	Address)	
(0	City/State/Zip/Phone #)	<del></del>
PICK-UP	☐ WAIT	MAIL
- (i	Business Entity Name)	
	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions		
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Office Use Only



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OCT 2 8 2015 S. YOUNG CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

REFERENCE : <u>838831</u> 8041010

AUTHORIZATION (

COST LIMIT : \$ 25.00

ORDER DATE: October 20, 2015

ORDER TIME : 9:20 AM

ORDER NO. : 838831-070

CUSTOMER NO: 8041010

## DOMESTIC AMENDMENT FILING

NAME: AYAMAL FIFTY 2 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:

SECRETARY OF STATE

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AYAMAL	FIFTY 2 LLC		
(Name of the Limited Liability Compa (A Florida Limited)	nny as it now appears on o Liability Company)	our records.)	<del></del>
he Articles of Organization for this Limited Liability Company	were filed on	4/13/2015	and assigned
orida document number L15000064528			
nis amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liab	ility company here:		
ne new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designa	tion "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:	990 BISCAYNE BLV	VD	
Principal office address MUST BE A STREET ADDRESS)	OFFICE 501		
	MIAMI, FL 33132		
	•		产 <b>5</b>
nter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)	990 BISCAYNE BLV	VD	空間 日 丁
	OFFICE 501		SS 27
	MIAMI, FL 33132		Fig _ B
			102 =
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here		records, ent	
			•
Name of New Registered Agent:			· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:			
	Enter Florida street address  Florida		
	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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	JJLB Property Management LLC	11 Broadway Suite 615 New York, NY 10004	Add
			■ Remove
			☐ Change
AMBR JJLE	JJLB Property Management LLC	255 Collins Ave. Suite 1, Miami FL 33139	B Add
			☐ Remove
			☐ Change
AMBR	AYAMAL LLC	11 Broadway Suite 615 New York, NY 10004	□ Add
		<u></u>	SECRETARY Changes
AMBR	AYAMAL LLC	990 Biscayne Blvd. Office 501 Miami, FL 33132	FIST AND
			₽₩ ₽ □ Remove
			Charma
<del></del>			Add
			☐ Remove
	44		□ Change
			Add
			□ Remove
			☐ Change

II amei	ading any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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		=
If an effect Note: I	re date, if other than the date of filing:	207 (
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.	of:
Dated _	22 OCTOBER 2015	
	Signature in a member or authorized representative of a member	
	,	
	Frank Slama, Member  Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00