

LS000157 155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

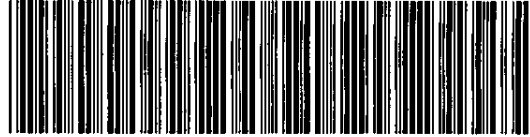
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800277337678

09/29/15--01005--015 \*\*25.00

FILED  
15 SEP 29 PM 4:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 30 2015  
S. YOUNG

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** VENETIAN LAND VENTURES, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

AYA FERNANDEZ-FRAGA

\_\_\_\_\_  
Name of Person

ARAZOZA & FERNANDEZ-FRAGA, P.A.

\_\_\_\_\_  
Firm/Company

2100 Salzedo Street, Suite 300

\_\_\_\_\_  
Address

Coral Gables, Florida, 33134

\_\_\_\_\_  
City/State and Zip Code

aya@aragoza.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

FILED  
15 SEP 29 PM 4:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Eduardo Lucca

305

7469890

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for 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  
TO  
ARTICLES OF ORGANIZATION  
OF**

VENETIAN LAND VENTURES, 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 SEPTEMBER 15, 2015 and assigned  
Florida document number L15000157155.

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 contain 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)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

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>                   | <u>Address</u>                    | <u>Type of Action</u>                      |
|--------------|-------------------------------|-----------------------------------|--------------------------------------------|
| AMBR         | 941 North Venetian Drive, LLC | 160 Greentree Drive, Suite 101    | <input checked="" type="checkbox"/> Add    |
|              |                               | Dover, Delaware, 19904            | <input type="checkbox"/> Remove            |
|              |                               |                                   | <input type="checkbox"/> Change            |
| AMBR         | 121 W San Marino, LLC         | 1201 North Market Street, 18th Fl | <input type="checkbox"/> Add               |
|              |                               | Wilmington, Delaware, 19801       | <input checked="" type="checkbox"/> Remove |
|              |                               |                                   | <input type="checkbox"/> Change            |
|              |                               |                                   | <input checked="" type="checkbox"/> Add    |
|              |                               |                                   | <input type="checkbox"/> Remove            |
|              |                               |                                   | <input type="checkbox"/> Change            |
|              |                               |                                   | <input type="checkbox"/> Add               |
|              |                               |                                   | <input type="checkbox"/> Remove            |
|              |                               |                                   | <input type="checkbox"/> Change            |
|              |                               |                                   | <input type="checkbox"/> Add               |
|              |                               |                                   | <input type="checkbox"/> Remove            |
|              |                               |                                   | <input type="checkbox"/> Change            |
|              |                               |                                   | <input type="checkbox"/> Add               |
|              |                               |                                   | <input type="checkbox"/> Remove            |
|              |                               |                                   | <input type="checkbox"/> Change            |

FILED  
15  
APR 29  
PM 1:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15  
SE  
TAL

**(optional)**

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated September 25, 2015, 2015

Signature of a member or authorized representative of a member

~~RAFAEL~~ GILL

Typed or printed name of signee

FILED  
SEP 29 2 4: 02 PM '94  
U.S. DEPT. OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION  
WASHINGTON, D.C. 20535  
RECEIVED  
SEP 29 1994  
FBI - TAMPA  
TAMPA, FLORIDA  
SEP 29 1994  
U.S. DEPT. OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION  
WASHINGTON, D.C. 20535