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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MF Nautica Investments LLC Name of Limited Liability Company
Name of Entired Elability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Oscar Martin Mazorra Name of Person
Firm/Company
199 Fairmont Way
Address
Weston Florida 33326 City/State and Zip Code Omartin 2227 Qyahoo.es E-mail address: (to be used for future annual report notification)
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Oscar Martin Mazorra at (954) 740-0754 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \text{S25.00 Filing Fee & Certificate of Status} \tag{0.00 Filing Fee & Certified Copy (additional copy is enclosed)} \tag{0.00 Filing Fee, Certified Copy (additional copy is enclosed)} \tag{0.00 Filing Fee, 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

M F NAUTICA INVESTMENTS LLC

(<u>Name of the Limited Liability Compan</u> (A Florida Limited L	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company visiting document number <u>L15 000169582</u> .	were filed on $10/06/2015$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil FONTAINEBLEAU MIAMI BEATHE new name must be distinguishable and contain the words "Limited Liabili Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ACH CONDOS LLC
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

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 = M $AMBR = A$	Anager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR ArechavaletaCarrer	ArechavaletaCarreras	199 Fairmont Way	D Add
	Armanao e	Weston, FL 33326	Remove
			☐ Change
MGR Martin Me	Martin Mazorra, Oscar	199 Fairmont Way	I\$∕ Add
	05car	199 Fairmont Way Weston, FL 3332.	6_□ Remove
			Change
			Add
			□ Remove
			Change
			Add
		Remove	
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		52	Remove
		MR CCI 26 CCRCTCA ATTACKSE	□:Change
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Filing Fee: \$25.00