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PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name	e)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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# **COVER LETTER**

Division of	Cor por actions		
Venetia:	n Holdings Park Place LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing	
		-	
Please return all corre	spondence concerning this matter	to the following:	
	Kenny Tran		
		Name of Person	
	Venetian Holdings Park Pl	ace LLC	
		Firm/Company	<del>.</del>
	3301 N University Dr STE	E 420	
	<del> </del>	Address	
	Coral Springs, FL 33065		
		City/State and Zip Code	<del></del>
	Kenny@trieudevelopment.c		
	E-mail address: (	to be used for future annual report notifi	ication)
For further information	on concerning this matter, please co	all:	
Kenny Tran		954 668-4563	
Nan	ne of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	or 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:

TO:

**Registration Section** 

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 Holdings Park Place LLC		
(Name of the Limited Lie (A Fi	ability Company as it now appears on our records orida Limited Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liabilities Included the Company of the Articles of Organization for this Limited Liabilities of Organization for the Organizati	ty Company were filed on	and assigned
This amendment is submitted to amend the following	<u> </u>	
A. If amending name, <u>enter the new name of the</u>		
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 AL	ODRESS)	
Enter new mailing address, if applicable:		
<u>Mailing address MAY BE A POST OFFICE BOX</u>	<u> </u>	
		- 6
		500
B. If amending the registered agent and/or registered agent and/or the new registered office a		·
Name of New Registered Agent:		10 to
New Registered Office Address:		<u> </u>
<del></del>	Enter Florida street addres.	s
<u>_</u>		orida
	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, <u>enter the title, name, and address of each person\_being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Steve Tricu	5560 N Military Trail	
		Suite 308	■ Remove
		Boca Raton, FL 33496	Change
AMBR	Ly Khanh Nguyen	5560 N Military Trail	_ ■ Add
		Suite 308	☐ Remove
,	Boca Raton, FL 33496	☐ Change	
			Add
			☐ Remove
			☐ Change
			Change
			Remove
			☐ Change
			□ Add
			Remove
			□ Change

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ective date, if other than the date of filing: neffective date is listed, the date must be specific and cannot be prior to date	(optional)
te: If the date inserted in this block does not meet the applicable	
cument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an	effective time, at 12:01 a.m. on the earlier
he 90th day after the record is filed.	
ted,	

Page 3 of 3

Typed or printed name of signce

Filing Fee: \$25.00