

MO 8000001243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

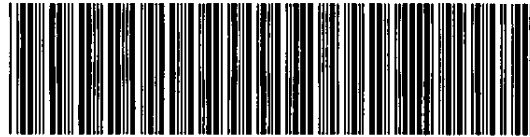
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FALLS CHURCH, VA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fontainebleau Miami JV LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Grace M. Mora
Name of Person

Fontainebleau Miami Beach
Firm/Company

4441 Collins Avenue
Address

Miami Beach, FL 33140
City/State and Zip Code

gmora@fontainebleau.com ; dgonzalez@fontainebleau.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Darlene Gonzalez at (305) 695-4808
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: Fontainebleau Miami JV LLC

2. Jurisdiction of its organization: Delaware

3. Date authorized to do business in Florida: March 14, 2008

SECTION II (4-7 complete only the applicable changes)

4. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

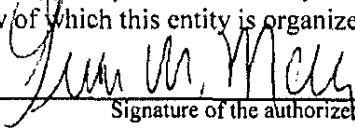
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: Removal of the following Managers: 1) Andrew Watson 4441 Collins Avenue Miami Beach Florida 33140;

2) Hamza Mustafa, 4441 Collins Avenue Miami Beach Florida 33140; 3) Mark Troy 4441 Collins Avenue, Miami Beach Florida 33140

7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

Grace M. Mora

Typed or printed name of signee

Filing Fee: \$25.00

16453-1 (11-1-21)
RECEIVED
MAR 14 2008
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
MIAMI DADE COUNTY, FLORIDA

This is attached for ease of reading

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change. THE CHANGE IS TO REMOVE THE FOLLWING MANAGERS.

- 1) Title MGR - **REMOVE**
WATSON, ANDREW
4441 COLLINS AVENUE
MIAMI BEACH, FL 33140
- 2) Title MGR - **REMOVE**
MUSTAFA, HAMZA
4441 COLLINS AVENUE
MIAMI BEACH, FL 33140
- 3) Title MGR - **REMOVE**
TROY, MARK
4441 COLLINS AVENUE
MIAMI BEACH, FL 33140