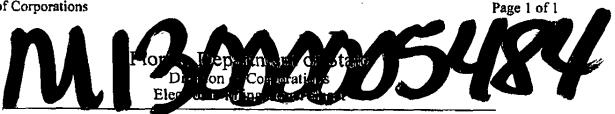
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092

Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.** Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1275 SOUTH OCEAN BOULEVARD LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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OCT-17 2013

D. BRUCE

COVER LETTER

TO: Registration S Division of C						
SUBJECT: 1275 SO	UTH OCEAN BOULEVARD	LLC				
	Name of Foreign	Limited Liab	lity Com	pany		
Dear Sir or Madam:				•		
The enclosed applica	tion, certificate and fee(s) a	re submitted fo	or filling.			
Please return all corre	espondence concerning this	matter to the f	oliowing	:		
TERESA FOLEY						
	Name of Person	*				
GOULSTON & STORI	RS	,			F: ;	2013
	Firm/Company					1113 OCT 16
885 THIRD AVENUE,	eth ei ood				ARY SEC	
- THE REPORT	Address				<u>ं</u>	<u> </u>
	Address				<u> </u>	4M IO: 43
NEW YORK, NEW YO	DRK 10022				êE	ţ3
	City/State and Zip Code					
Teresa.foley@go	ULSTONSTORRS.COM		•			
E-mail address: (to	be used for future annual i	eport notificat	on)			
For further information	on concerning this matter, p	olease call;	574-401	3		
Namo	of Person		& Daytin	ne Telephone Number		
Registration & Division of C Clifton Build	orporations ing ve Center Circle	Registration Section Division of Corporations P.O. Box 6327		ration Section on of Corporations ox 6327		
Enclosed is a check in \$25 Filing Fee	for the following amount: \$\alpha\$ \$30 \text{ Filing Pee & Certificate of Status}\$	2 \$55 Filing Certified C		□ \$60 Filing Fee, Certificate of Status &	è	

Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION 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: 1275 SOUTH OCRAN BOULEVARD LLC
2.	Jurisdiction of its organization: DELAWARE
3.	Date authorized to do business in Florida: 8/29/2013
	SECTION II (4-7 complete only the applicable changes)
4.	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization?
5.	New name of the limited liability company:
•	(must end with "Limited Liability Company, " "L.L.C.," or "LLC.")
Flo the	name unavailable, enter alternate name adopted for the purpose of transacting business in prida and attach a copy of the written consent of the managers or managing members adopting alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." (C.")
6.	If the amendment changes the period of duration, indicate new period of duration:
7.	If the amandment changes the jurisdiction of organization, indicate new jurisdiction:
	If the amendment corrects any false statement, indicate the statement being corrected and the correction; Change of Principal Office Address and Address of Managers:
Do	rugias M. Husid and Mark D. Balk, c/o Coulsion & Storts PC, 885 Third Ave., 8th Floor, New York, NY 10022
9.	Attached is an original certificate, 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 a member or the authorized representative of a member
	TERESA FOLEY, AUTHORIZED REPRESENTATIVE
	Typed or printed name of signee
	Filing Fee: \$25.00

FLOOT - 03/16/3013 Welkery Kluwer Chiles