102000019917

(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



400317019114

08/20/18--01037--007 ++60.00

FILED SECRETARY OF STATE DIVISION OF CORPORATION

N COOPER AUG 2 4 2018

BANKIER, ARLEN & SNELLING LAW GROUP, PLLC

101 S.E. 6TH AVENUE, SUITES C & D • DELRAY BEACH, FLORIDA 33483

ROBERT M. ARLEN

BOARD CERTIFIED TAX LAWYER ATTORNEY AT LAW, LL.M. IN ESTATE PLANNING, CPA (561) 279-1880 OFFICE LINE • FAX (561) 278-1995

M. ADAM BANKIER **

BOARD CERTIFIED IN WILLS, TRUSTS & ESTATES ATTORNEY AT LAW, LL.M. IN TANATION, CPA (561) 278-3110 OFFICE LINE • FAN (561) 278-3143

LINDA L. SNELLING

ATTORNEY AT LAW, LL.M. IN TAXATION, CPA (561) 501-7778 OFFICE LINE • FAX (561) 278-3143

Arielle Cole, CP, FRP Certified Paralegal/Florida Registered Paralegal Email: acole@hankietlaw.com Please reply to Delray Beach, FL office

August 17, 2018

Via Federal Express

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

Re:

2080 Ocean Drive, LLC

Florida document number: L020000019917

Dear Sir/Madam:

Enclosed please find the original Articles of Amendment to Articles of Organization of 2080 Ocean Drive, LLC along with check number 0438 which represents the filing fee. Certificate of Status, and a Certified Copy.

If you have any questions, please contact me at the Delray Beach number listed above.

Very truly yours,

BANKIER, ARLEN & SNELLING LAW GROUP, PLLC

By

Arielle Cole, CP, FRE

Enclosures



COVER LETTER

	ration Section of Corporation				
20	080 Ocean D	rive, LLC			
SUBJECT:			ited Liability Company	· ·	
The enclosed A	rticles of An	nendment and fee(s) are sub	mitted for filing.		
Please return all	correspond	ence concerning this matter	to the following:		
		Robert B. Levine, Esquire			
			Name of Person		-
		Hinckley Allen			
			Firm/Company		-
		20 Church Street			
			Address		-
		Hartford, CT 06103			
			City/State and Zip Code		-
		rlevine@hinckleyallen.com			
		E-mail address: (to be used for future annual repo	ort notification)	
For further info	rmation con	cerning this matter, please ca	all:		
Robert B. Levi	ne, Esquire		860 331-2	704	
	Name of Pe	erson	at ()at Code	Daytime Telephone Numbe	r
Enclosed is a ch	icck for the	following amount:			
□ \$25.00 Filir	ig Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	d) Certifie	ate of Status &

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

2080 Ocean Drive, LLC				
(Name of the Limited (A	Liability Compa Florida Limited I	ny as it now appears on our requiability Company)	ords.)	
The Articles of Organization for this Limited Liab Florida document number L02000019917	ility Company	were filed on August 5, 200	and assigned	
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the	ne limited liab	ility company here:		
The new name must be distinguishable and contain the word	ls "Limited Liabil	lity Company," the designation "	LLC" or the abbreviation "L.L.C."	_
Enter new principal offices address, if applicable:		20 Church Street	DIV.	<u>¥</u>
(Principal office address MUST BE A STREET.	ADDRESS)	Hartford, CT 06103	A ISTO	유 문
		•	လ ု	<u> </u>
			O P	<u> </u>
Enter new mailing address, if applicable:		20 Church Street	<u>≭</u> 70	مند مند
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>	Hartford, CT 06103	<u> </u>	ži Pi
			<u>α</u> Ξ	_
B. If amending the registered agent and/or registered agent and/or the new registered office. Name of New Registered Agent:		<u>e</u> :	ords, enter the name of the	new
New Registered Office Address: 7073 Treymo		e Court		
New Registered Office Address:		Enter Florida street a	ldress	_
	Sarasota		, Florida ³⁴²⁴³	
		City	Zip Coxle	
New Registered Agent's Signature, if changing Re-	gistered Agent:	L		
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the recompany has been notified in writing of this ch	and complete ered agent as gistered office	performance of my dutie previded for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document	

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>	Address	Type of Action
MGR	Robert H. Cohen		O Add
		Aventura, Florida 33160	Remove
			☐ Change
MGR	Robert B. Levine	20 Church Street	B Add
		Hartford, CT 06103	☐ Remove
			☐ Change
		· · · · · · · · · · · · · · · · · · ·	
			□ Remove
			□ Change
			Add
			☐ Remove
			_ □ Add
			☐ Remove
			☐ Change
			Remove
			☐ Change

Effective date, if other than the date of filing: (optional)	18 AUG 20 PN 12:	-
	AUG 20	-
	AUG 20	-
	AUG 20	- - -
	AUG 20	-
	AUG 20	
	AUG 20	-
	AUG 20	_
	AUG 20	
Tective date, if other than the date of filing:	AUG 20	0
Tective date, if other than the date of filing:	20	DIVISION
ffective date, if other than the date of filing;		
ffective date, if other than the date of filing;	<u>_</u>	
ffective date, if other than the date of filing;	∇	CORPORAL
ffective date, if other than the date of filing:	- 3	- (1 CK)
fective date, if other than the date of filing:		- ´ ¯
fective date, if other than the date of filing:) Pursuant to 60 will not be lis	 05.01 sted
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. The 90th day after the record is filed.		lier
ated August 13th, 2018		1101
ated August 13it, 2018 Wawager Signature of a member or authorized representative of a member		,10,1

Page 3 of 3

Filing Fee: \$25.00