L09000028579

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



400149851194

04/15/09--01014--008 **25.00

O9 APR 15 AH 9: 43
SECRETARY OF STATE
ALLAHASSEE, FISHIO

S. HAWKES

APR 1 6 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Kluger, Kaplan, Silverman, Katzen & Levine, P.L.
(Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alan J. Kluger (Name of Person)
Kluger Kaplan Silverman Katren ; levine, P., (Firm/Company) 2015 · Biscayne Blvd. ~ 17th Floor (Address)
2015 · Biscayne Blvd 17th Floor
Miami, F[33131 (City/State and Zip Code)
For further information concerning this matter, please call:
Plan J. Kluger at 305, 379-9000 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \text{Certified Copy} \text{(additional copy is enclosed)}\$\$ \text{Certified Copy} \text{(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

Kluger, Kaplan Silverman, Katzen ? Levine, P. L.

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability	Company were filed on 3/	24/09 and assigned	
Florida document number <u>L090000 285</u>	na	and assigned	
Florida document number <u>LO 10000 & 6 5</u>	<u>.1.4</u> .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability company here:		
The new name must be distinguishable and end with the w	vords "Limited Liability Company,"		
"L.L.C."		SEC .	
Enter new principal offices address, if applicable:	 ,	AR P	
(Principal office address MUST BE A STREET ADL	DRESS)	5	
		9 0	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	,		
B. If amending the registered agent and/or registered		records, enter the name of the new	
registered agent and/or the new registered office ad	igress nere:		
N. D. C. LA			
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
		, Florida	
	(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 608, 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Title **Type of Action** Name **Address** Alan J. Kluger

Abbey L. Kaplan M6R MOR same as above Steve I. Silverman Add Remove Bruce A. Katzen MGR MOR Todd A. Levine Remove Jason R. Marks D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) * additional sheet attached Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGRM = Ma	ager anaging Member		
<u>Title</u>	Name	Address	Type of Action
MOR	Michael S. Perse Philippe	2015. Biscayne Blvd. The floor Miami, Fl 33131 Same as above	Add Remove
MGP	Rooth Lieberman	Same as above	Add Remove
			Add Remove
			Add Remove
			Add Rentoye
D. If amendin	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.	
Dated Ap	ril 13 , 200	9	
-	Signature of a member of Alan Typed or	r authorized representative of a member T. Klungev Printed name of signee Page 2017 3 94-3	

Filing Fee: \$25.00