

L12000026181

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☒ PICK-UP

☐ WAIT

☐ MAIL

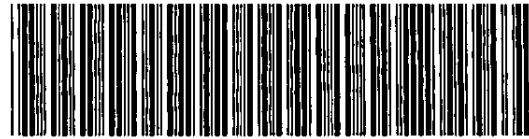
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400248392564

400248392564
06/18/13--01021--005 **25.00

FILED

2013 JUL 24 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 24 2013

T CLINE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 19, 2013

YESRAELI MEIR
267 FIFTH AVE 803
NEW YORK, NY 10016

SUBJECT: M.J. HOLDINGS 2012 LLC
Ref. Number: L12000026181

We have received your document for M.J. HOLDINGS 2012 LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline
Regulatory Specialist II

Letter Number: 613A00015427

2013 JUL 24 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **M.J HOLDINGS 2012 LLC**

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:

YESRAELI MEIR

Name of Person

M.J HOLDINGS 2011 LLC

Firm/Company

267 FIFTH AVE 803

Address

NEW YORK, NY, 10016

City/State and Zip Code

MEIRIL@012.NET.IL

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MEIR ISRAELI

Name of Person

054 559-4390

at ()

Area Code & Daytime Telephone Number

Enclosed is a check for 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:
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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 JUL 24 PM 12:41

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

M.J HOLDINGS 2012 LLC

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

FILED
2013 JUL 24 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 2012 and assigned
Florida document number L12000026181

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with 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 ADDRESS)

3030 N. ROCKY POINT DRIVE, SUITE 150A
TAMPA, FL, 33607
USA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3030 N. ROCKY POINT DRIVE, SUITE 150A
TAMPA, FL, 33607
USA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

NORTHWEST REGISTERED AGENT

New Registered Office Address:

3030 N. ROCKY POINT DRIVE, SUITE 150A

Enter Florida street address

TAMPA


Florida 33607

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 Changing Registered Agent, Signature of New Registered Agent

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:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2019 JUL 24 PM 12:4
 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated MARCH 15, 2013

M. ISRAELI

Signature of a member or authorized representative of a member

MEIR IRAELI

MEIR ISRAELI

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 JUL 24 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED