

L12000150921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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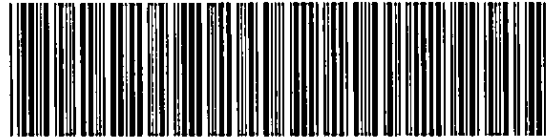
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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MAY 30 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ABR Ceramics, 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:

Alan Jeffrey Sherman

Name of Person

ABR Ceramics, LLC

Firm/Company

PO Box 13351

Address

Miami, FL 33101

City/State and Zip Code

panamainvestments@yahoo.com

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

For further information concerning this matter, please call:

Beatriz Gomez

786 4889660

at ()
Name of Person 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

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

ABR Ceramics, LLC

(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 December 3, 2012 and assigned
Florida document number 1.12000150921.

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 contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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:

Alan Jeffrey Sherman

New Registered Office Address:

5701 Sunset Drive #223

Enter Florida street address

South Miami

Florida 33143

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 605, 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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Benjamin Sherman	PO Box 13351	<input type="checkbox"/> Add
		Miami, FL 33101	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Alexandra Sherman	PO Box 13351	<input type="checkbox"/> Add
		Miami, FL 33101	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Raquel Sherman	PO Box 13351	<input type="checkbox"/> Add
		Miami, FL 33101	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Beatriz Gomez Pereyra	5701 Sunset Drive #223	<input type="checkbox"/> Add
		South Miami, FL 33143	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ALAN JEFFREY SHERMAN	5701 SUNSET DRIVE #223	<input checked="" type="checkbox"/> Add
		SOUTH MIAMI, FL 33143	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	THELMA ROXANNA SHERMAN	PO Box 13351	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33101	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated MAY 19 , 2018

Signature of a member or author

Signature of a member or authorized representative of a member

Alan Jeffrey Sherman

Typed or printed name of signee