## L17000 239629

(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phon	e #)
(Business Entity Name)  (Document Number)	MAIL	
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## **COVER LETTER**

SUBJECT:	1500 BAY RO	AD UNIT 236S, LLC	
SUBJECT:	Name of Limi	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	CHANTAL NICHTAWIT	Z	
		Name of Person	
		Firm/Company	
	1020 NW 105TH AVENU	E, B-119	
	<del></del>	Address	
	PLANTATION, FLORIDA	A 33322	
		City/State and Zip Code	
	chantal.nichtawitz@icloud.		~ · · · · ·
		to be used for future annual report noti	neation)
For further information c	oncerning this matter, please ca	all:	
	BAUM, ESQ.	954 256-9 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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:

TO:

**Registration Section Division of Corporations** 

> 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

	AY ROAD UNIT 236S, LLC		
(Name of the Limited (A	Liability Company as it now appe Florida Limited Liability Company	ears on our records.)	
The Articles of Organization for this Limited Liab Florida document number L17000239629	oility Company were filed on	NOVEMBER 20, 2017	and assigned
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of the	ne limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the	e designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office		on our records, <u>ente</u>	r the name of the ne
Name of New Registered Agent:			Sign A
New Registered Office Address:	Enter F	lorida street address	FLORII
	City	, Florida _	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:

MOR = 'Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	GCA HOLDINGS GROUP, LLC	1020 NW 105th Avenue, B-119	
		Plantation,.Florida 33322	□ Remove
			☐ Change
AMBR	CHANTAL NICHTAWITZ	1020 NW 105th Avenue, B-119	□ Add
		Plantation, Florida 33322	■ Remove
			☐ Change
AMBR	ANTHONY NICHTAWITZ	1020 NW 105th Avenue, B-119	□ Add
		Plantation, Florida 33322	■ Remove
			☐ Change
AMBR	Gloria Nichtawitz Revocable Trust	1020 NW 105th Avenue, B-119	
		Plantation, Florida 33322	■ Remove
			□ Change
			□ Add
			☐ Remove
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<del></del>			Add
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ffective date, if other than the an effective date is listed, the date mu ote: If the date inserted in this b	st be specific and cannot be	prior to date of filing or	more than 90 days af	tional) ter filing.) Pursuant to be l	605.02 listed
ocument's effective date on the E	Department of State's rec	ords.	ing requirements, i	ins date will not be i	nsica (
e record specifies a delaye	d effective date bu	t not an effective	time. at 12:01	a.m. on the ea	ırlier
The 90th day after the rec	cord is filed.	c not an eneceive	. cime, at 12.01		
ated ARUL 1	9, 20	218			
		KJ S.	$\sum_{i}$	<u> </u>	_

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Filing Fee: \$25.00