Page 1 of 2



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Page: 1 of 4 1

Division of Corporations

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : YCORP SERVICES, LLC

Account Number : 120080000067 Phone : (845)425-0077
Fax Number : (845)818-3588

**Ente	r t	he	email	address	for	this	business	entity	, to	be '	used	for	future
- 6	annı	ıal	repor	t mailir	ıgs.	Enter	only one	e email	addi	ress	s ple	ase.	**

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To: 18506176383 Page; 2 of 4 2020-12-17 15:35.34 GMT 18886118813 From: Vcorp Services, LLC

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

llan-Roci2000 LLC (Name of the Limited Liability Company as it now	appears on our recor	rds.)		
(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	pany)	LALI,		
The Articles of Organization for this Limited Liability Company were filed of Clorida document number <u>L19000118893</u> .	on 05/01/2019	a	ndassig	ned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability compa	iny here:			
The new name must be distinguishable and contain the words "Limited Liability Company,	" the designation "FE	C" or the abbrevia	tion "L.I. 6	-
	are designation 1755	ic or the market		
nter new principal offices address, if applicable:	-			
Principal office address MUST BE A STREET ADDRESS)			<u></u>	
			_ 8	
		;; ;;	1020 DE	
Inter new mailing address, if applicable:				<u> </u>
Mailing address MAY BE A POST OFFICE BOX)			_	
		in the		
		[].	=	, # g
3. If amending the registered agent and/or registered office address on gent and/or the new registered office address here:	our records, ente	er the name of t	he new	registér
gent and/or the new registered office address here:		Ē	+	
Name of New Registered Agent:				
New Registered Office Address:				
En	ter Florida street addr	cess		
	F	Florida		

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.

City

To: 18506176383 Page: 3 of 4 2020-12-17 15:35:34 GMT 18886118813 From: Vcorp Services, LLC

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
AMBR	Roci Aviv	950 Peninsula Corporate Circle Suite 1013	= Add
		Boca Raton, FL	□Remove
			□Change
AMBR	Han Aviv	950 Peninsula Corporate Circle Suite 1013	🗆 Add
		Boca Raton, FL	□Remove
			= Change
			□ Add
			□Remove
			🗀 Add
			□Remove
			Change
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			□Remove
			□ Change
			□Add
			□Remove
			□Change

		2:01 a.m. on the earlier of: (b). The 90th	Anna Anna da a
document's effective date on the De	epartment of State's records.	, , ,	
Note: If the date inserted in this blo	nck does not meet the applicable sta	(optional) of filing or more than 90 days after filing.) Pursua tutory filing requirements, this date will no	int to 605,0207 (3)(b) it be listed as the
F - Effective date if other than the	date of filing:	(optional)	
			
			
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Typed or printed name of signee