

L10000037969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

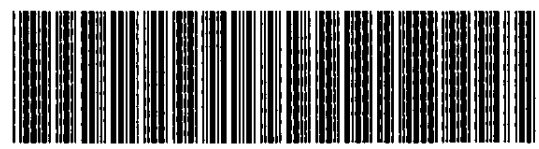
Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

JUN 04 2010

EXAMINER



100181610741

06/03/10--01022--008 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JUN -3 AM 8:43

**MREJEN
BLINDERMAN, P.L.**

Attorneys at Law



Corporate Park at Cypress Creek
One Cypress Place, Suite 302
701 West Cypress Creek Road
Fort Lauderdale, FL 33309

Telephone: 954.771.3740

Facsimile: 954.771.3047

Arie Mrejen
Attorney at Law

amrejen@mrejenlaw.com
Direct: 954.771.4475

June 2, 2010

Florida Department of State
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Via FedEx No.: 7935 9768 4013

RE: Tahiti Gardens 26, L.L.C.

To Whom It May Concern:

Please find enclosed Articles of Amendment to Articles of Organization of Tahiti Gardens 26, L.L.C. along with our check number 2606 for the appropriate filing fee.

Should you have any questions, comments or concerns, please feel free to contact our office.

Sincerely,
ARIE MREJEN, P.A.

By:


Arie Mrejen, Esquire

AM:nim
Enclosure(s)

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TAHITI GARDENS 26, 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:

ARIE MREJEN, ESQUIRE
Name of Person

ARIE MREJEN, P.A.
Firm/Company

701 W. CYPRESS CREEK RD., #302
Address

FORT LAUDERDALE, FL 33309
City/State and Zip Code

amrejen@mrejenlaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ARIE MREJEN at (954) 771-3740
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**

TAHITI GARDENS 26, 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 MARCH 12, 2010 and assigned Florida document number L10000027969.

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)

SECRETARY OF STATE
DIVISION OF CORPORATE FILINGS
JUN -3 AM 8:43

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

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 Changing Registered Agent, Signature of New Registered Agent

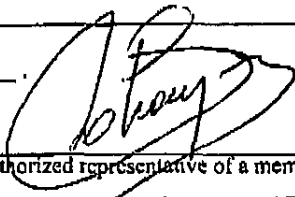
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

**MGR = Manager
MGRM = Managing Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LEONEL HARARI	C/O 701 W. CYPRESS CREEK RD. SUITE 302 FORT LAUDERDALE, FL 33309	<input checked="" 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

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

Dated JUNE 1, 2010



Signature of a member or authorized representative of a member

MOISE OHAYON AS MANAGING MEMBER

Typed or printed name of signee