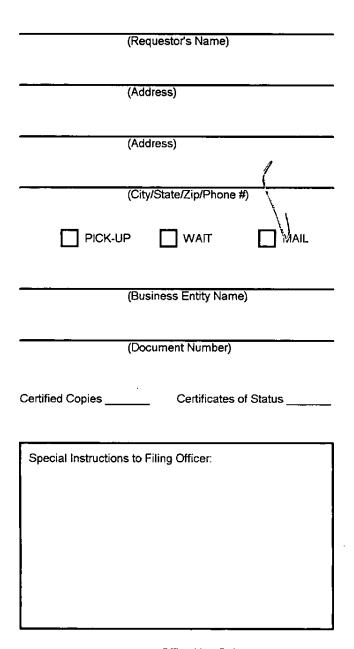
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B. BOSTICK
JUL **2 3** 2013

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 1613 FARMINGTON, 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:
ERV FIEISHMAN Name of Person
Firm/Company
2800 S. OCEAN BIVD PH-L BOCK RATION, FI. 3343
City/State and Zip Code ERUSERVE @ GMAIL, COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
For further information concerning this matter, please call:
ERV FIEISHMAN at (561) 6546116 Name of Person Area Code & Daytime Telephone Number 38
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

1613 FARMINGTON	,UC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records Liability Company)	r)
The Articles of Organization for this Limited Liability Company Florida document number <u>L130003023</u> 2	were filed on $\frac{2/27/2}{2}$	2013 and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	pility company here:	FILLAHAS
		SET 2 → 1
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designat	ion "LLC" or the abbreviation
Enter new principal offices address, if applicable:	KATHERINE PLE	USHMAN
(Principal office address MUST BE A STREET ADDRESS)	2800 S OCEAN BOCA RATON, F	VBWD PH-L L33432
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:		
	, Florid	
	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 Type of Action **Address Title** <u>Name</u> KATHERINE FLEISHMAN 2800 S. OCEAN BLVD X Add BOCA RATON, PH-L 33432 MGRM ERV FLEISMAN 2800 S. OCBAN BLVD X Add MGR TIMOTHY ATTEBERRY 212 E OCEAN AVE Add LANTANA, FL 33462 Remove Remove

If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
d	JULY 18, 2013.
	1 11 1
	Simothy attellery
	Signature of a member or authorized representative of a member
	TIMOTHY D. ATTEBERRY Typed or printed name of signee
	typed of printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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