# 117000091869

| (Requestor's Name)                      |
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|   |
| (Address)                               |
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| (Address)                               |
| (City/State/Zip/Phone #)                |
| (Olystates Elph Holie #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
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Office Use Only



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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT.

1600 Lenox, 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:

### **Deborah Love**

Name of Person

Friedman, Rosenwasser & Goldbaum, P.A.

Firm/Company

5355 Town Center Rd., Suite 801

Address

Boca Raton, FL 33486

City/State and Zip Code

dlove@frglaw.com

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

For further information concerning this matter, please call:

## **Deborah Love**

<sub>(</sub>877<sub>)</sub>605-9141

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

| 1600 LENOX, LLC  |  |                         |
|--|--|-------------------------|
| (Name of the Limited Liability Company a<br>(A Florida Limited Liabi   | s it now appears on our records.)<br>lity Company) | <del></del>             |
| The Articles of Organization for this Limited Liability Company wer  | re filed on 06/26/2013                             | and assigned            |
| Florida document number L13000091869   |  |                         |
| 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 I"L.L.C."   | Liability Company," the designation "L             | LC" or the abbreviation |
| Enter new principal offices address, if applicable:  |  |                         |
| (Principal office address MUST BE A STREET ADDRESS)  | , mar  | 3<br>3<br>3             |
| _  |  | Company Company         |
| Enter new mailing address, if applicable:  | 12<br>124<br>124<br>124                            | Tales of Section 1      |
| (Mailing address MAY BE A POST OFFICE BOX)   |  | 5 <u>1</u>              |
| _  | \  |                         |
| B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: | address on our records, enter the                  | ne name of the nev      |
|  |  |                         |
| Name of New Registered Agent:  |  |                         |
| New Registered Office Address:   | Enter Florida street addr                          | ess                     |
|  | , Florida  |                         |
| $\overline{C}$   | ity  | 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | Address  | ype of Action |
|--------------|-------------|--|---------------|
| MGRM         | John Kunkel | 4770 Biscayne Blvd., Suite 1280, Miami FL 33137  | Add           |
|              |             |  | Remove        |
| MGR          | John Kunkel | 4770 Biscayne Blvd., Suite 1280, Miami FL 33137  | Add           |
|              |             |  | Remove        |
|              |             |  | Add           |
|              |             |  | Remove        |
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|              |             | <u>Sin</u>   | Add Remove    |
|              |             |  | Add           |
|              |             |  | Remove        |

| D. If a | amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)              |
|---------|--|
|         | Article III (Limited Liability Purpose) is replaced in its entirety with the following:                      |
| •       | any and all lawful business.   |
|         |  |
| Dated   | September 19 2013  |
|         | Jahn Kunkel  |
|         | Signature of a member or authorized representative of a member  John Kunkel  Typed or printed name of signee |
|         | Page 3 of 3  |

Filing Fee: \$25.00

