

11/13/2013 14:48

Division of Corporations

SENATOR LAW CENTER

PAGE 01/05

Page 1 of 1

L13000108080

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H13000251398 3)))



H130002513983ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LAW OFFICES OF STEINBERG & ASSOCIATES, P.A.
Account Number : I19980000080
Phone : (305) 538-2344
Fax Number : (305) 538-0419

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:

mark@alhadeflaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
RONRUSS OCEANS FIVE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

NOV 14 2013

T. W. WILSON

RECEIVED
13 NOV 13 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2013 NOV 13 AM 8:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H13000251398 3
COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **RONRUSS OCEANS FIVE, 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:

Mark Alhadeff, Esq.

Name of Person

The Alhadeff Group

Firm/Company

767 Arthur Godfrey Road

Address

Miami Beach, FL 33140

City/State and Zip Code

mark@alhadefflaw.com

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

For further information concerning this matter, please call:

Mark Alhadeff

Name of Person

at (**305 538-2344**)

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

H13000251398 3

H13000251398 3
ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

RONRUSS OCEANS FIVE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
 (A Florida Limited Liability Company)

FILED
 2013 NOV 13 AM 8:19
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 07/31/2013 and assigned
 Florida document number L13000108080

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) _____

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

H1 3000251398 3

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	Keith Menin	3050 Biscayne Blvd.	<input checked="" type="checkbox"/> Add
		PH1	<input type="checkbox"/> Remove
		Miami, FL 33137	
			<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

2013 NOV 13 AM 8:19
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

2013 NOV 13 AM 8:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H13000251398 3

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

Dated

November 13, 2013

Signature of a member or authorized representative of a member

Mark Alhadeff attorney-in-fact

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2013 NOV 13 AM 8:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H13000251398 3