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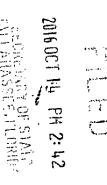
(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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K. SALY 0CT 14 2016

COVER LETTER

TO: Registration S Division of Co	ection rporations		
SUBJECT:	S M Name of Limit	Howes (LC
The enclosed Articles of	f Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Jacob Ziva	<u> </u>
		Name of Person	
		SMK Homes	<u>UC</u>
		Firm/Company	al Allera off
	1755 E. Ha	llandale Brach I	3/vd. #2306E
		Address	
	Hallandal	e Deach, FL	33009
		City/State and Zip Code	
	62re4i	ragnail.co	<u> </u>
		to be used for future annual report notif	ication)
For further information	concerning this matter, please ca	ग्री:	
lacot	> Zivan	at 954, 854-	- 8664
Name	of Person	Area Code Daytimo	: 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

T	Λ	god.
ARTICLES OF O		
O		20/6 000
Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our reco-	2016 OCT 14 PM 2: 49 rds.)
The Articles of Organization for this Limited Liability Company	were filed on Olo	2015 and assigned
Florida document number <u>L1500003694</u> .		
•		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LI	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1755 E Hala	ndale Beach Olla.
(Principal office address MUST BE A STREET ADDRESS)	Hallandale,	06-E FL 33009
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1455 E. Hallo Unit +2306	andale Beach Blvc
	Hallandate	FL 55007
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
Tien Registered Office / Marcos.	Enter Florida street addi	ress
	.1	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

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 = Mar AMBR = Aut	nager horized Member	•	
<u>Title</u>	Name	Address	Type of Action
AMBR	Abraham Zivan	1755 E. Hallandale Bearl Unit 230GE Hallandale FL 33009	
AMBR	ARLET Zivan	1755 E. Hallandale Beach unit 2306-E Hallandale Brach Fl. 3300	Change Add
		<u> </u>	Change
	<u></u>		Change ??
			□ Remove□ Change□ Add
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fecti	ive date, if other than the date of filing: 10/1/10 (optional)
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
	pour anacifica a dalayed affective data but not an affective time, at 12,01 a.m. on the carlier
	ford specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier 0 90th day after the record is filed.
	2016
ited .	
	Signature of a member of authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00