LDDCCCOTIOSY

· (R	equestor's Name)
· (A	ddress)
· (A	ddress)
a# (C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	SELLERS DEC 2 2 2010 AMINICA

Office Use Only

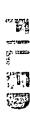


100188825541

12/20/10--01053--017 **818.75

SECRETICAL IN STATE
TALLAHAS TEB-FLORIBA

) DEC 20 PM 3: 3



KANE AND KOLTUN

Attorneys At Law

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS 557 NORTH WYMORE ROAD SUITE 100

Maitland, Florida 32751

Telephone: (407) 661-1177 • Telefax: (407) 660-6031

E-Mail: lawoffices@kaneandkoltun.com

IRINA G. DOLINSKIY*** ELINA G. VALENTINE

***Also admitted in New York

**Also admitted in Ohio and Kentucky

STEVEN H. KANE*

*L.L.M. in Taxation

JEFFREY M. KOLTUN**

Florida Board Certified in

Wills, Estates and Trusts

December 15, 2010

Division of Corporations Registration Section P.O. Box 6327 . Tallahassee, FL 32314

Re: Feldman Family2, LLC

Dear Sir/Madam:

Enclosed are the following documents for filing:

- 1. Limited Liability Company Reinstatement for Feldman Family, LLC; and
- 2. Articles of Amendment to Articles of Organization requesting a new name for the LLC -Feldman Family2, LLC.

Also enclosed is our firm check in the amount of \$818.75 to cover all filing fees (\$793.75 for the reinstatement and \$25 for the Articles of Amendment). I have also attached a copy of the e-mail correspondence between your Lee Yarbrough and myself regarding this matter.

Please do not hesitate to contact me if you have any questions regarding this matter.

Sincerely,

KANE AND KOLTUN ATTORNEYS AT LAW

Nancy J. Carnoun

Legal Assistant to Steven H. Kane

/njc

ENCS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FELDMAN F.	AMILY, LLC
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)
. The Articles of Organization for this Limited Liability Company Florida document numberL0200017684	were filed onJULY 15, 2002 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
FELDMAN FAI	·
The new name must be distinguishable and end with the words "Limi L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	661 COLUMBIA DRIVE
(Principal office address MUST BE A STREET ADDRESS)	WINTER PARK, FL 32789
Enter new mailing address, if applicable:	661 COLUMBIA DRIVE
Mailing address MAY BE A POST OFFICE BOX)	WINTER PARK, FL 32789
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:	fice address on our records, <u>enter the name of the new</u> e:
New Registered Office Address:	Am -
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent and agre	Enter Florida street address , Florida City Zip Code
hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and completed the proper and completed the obligations of my position as registered agent as parting filed to merely reflect a change in the registered office company has been notified in writing of this change.	lete performance of my duties, and Pam familiar with and provided for in Chapter 608, F.S. Or, if this document is
If Chan	ging Registered Agent, Signature of New Registered Agent

Page 1 of 2

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

Title <u>Name</u> <u>Address</u> Type of Action **MGRM** ROBERT B. FELDMAN 661 COLUMBIA DRIVE ☐ Add WINTER PARK, FL 32789 Remove MGRM LISA N. FELDMAN 1316 GREEN COVE ROAD WINTER PARK, FL 32789 ☐ Add _ Remove Remove ∏Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) OCT 15 Dated ____ Signature of a member or authorized representative of a member STEVEN H. KANE Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00