# L03000022455

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### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

LMF,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:

# LAWRENCE M. FINE

Name of Person

# LMF, DEVELOPMENT

Firm/Company

1835 EAST HALLANDALE BEACH BLVD #379

Address

HALLANDALE BEACH, FL.,33009

City/State and Zip Code

## amateurstockphoto@gmail.com

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

For further information concerning this matter, please call:

## Lawrence M. Fine

<sub>...</sub>561 502-7912

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

LMF, LLC	SECALL AH
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	Ciability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L03000022455</u>	were filed on O6-16-2003  Were filed on O6-16-2003  Were filed on O6-16-2003  Were filed on O6-16-2003
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	i <u>lity company here</u> :
LMF DEVELOPMENT, LLC	
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1835 EAST HALLANDALE BEACH BLVD.
(Principal office address MUST BE A STREET ADDRESS)	#379
	HALLANDALE BEACH, FL., 33009
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	1835 EAST HALLANDALE BEACH BLVD. #379
	HALLANDALE BEACH, FL.,33009
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her  Name of New Registered Agent:  New Registered Office Address:	ffice address on our records, enter the name of the new
	, 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 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			☐ Remove
		<del></del>	
			□ Add
			SECRE SEP 22 PAR 1: 3 Remove
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			□ Remove

). If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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-	
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	ive date, if other than the date of filing:
Dated	
	January My Fine
	Signature of a member or authorized representative of a member
	Lawrence M. Fine
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SEUNE ANT OF STATE