

L03000024428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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☐

MAIL

(Business Entity Name)

(Document Number)

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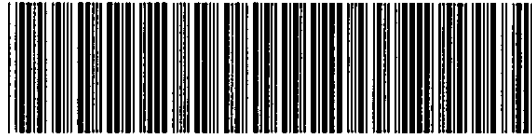
Special Instructions to Filing Officer:

A. LUNT

JUN 03 2008

EXAMINER

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05/30/08--01026--003 **30.00

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2008 MAY 30 P 12:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SARA'S TENT 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:

HAIM ALTIT

(Name of Person)

SARA'S TENT LLC

(Firm/Company)

19707 TURNBERRY WAY, #28L,

(Address)

AVENTURA, FL 33180

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

LARRY S. SAZANT, PA

(Name of Person)

at (954) 458-6801

(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**

SARA'S TENT LLC

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

The Articles of Organization for this Limited Liability Company were filed on JANUARY 3, 2007 and assigned
Florida document number LO3000024428

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NO

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)

NO

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NO

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TALLAHASSEE, FLORIDA

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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:

NO

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.

NO

(If Changing Registered Agent, Signature of New Registered Agent)

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	Name	Address	Type of Action
			<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

MEMBERS shall be amended as follows:
The Limited Liability Company has one(1) member
whose name & address is
HAIM ALTIT
19707 TURNBERRY WAY #28L
AVENTURA, FL. 33180

Dated May 28 / 2008


Signature of a member or authorized representative of a member
HAIM ALTIT
Typed or printed name of signee

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2008 MAY 30 P 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SARA'S TENT, LLC, a Florida Limited Liability Company

- FIRST: The date of filing of the articles or organization was January 3, 2007.
- SECOND: The following amendments to the articles of organization were adopted by the limited liability company.

ARTICLE V – MEMBERS shall be amended as follows:

The limited liability company has one (1) member whose name and address is:

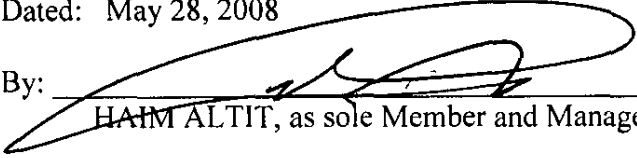
Haim Altit
19707 Turnberry Way, Apt. #28L
Aventura, Florida 33180

ARTICLE VI – MANAGEMENT is as follows:

The name and address of the sole managing member is:

Haim Altit
19707 Turnberry Way, Apt. #28L
Aventura, Florida 33180

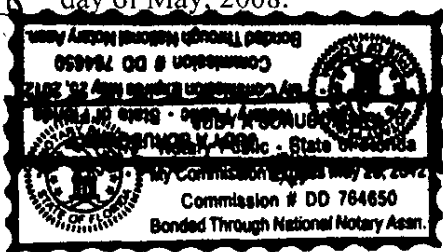
Dated: May 28, 2008

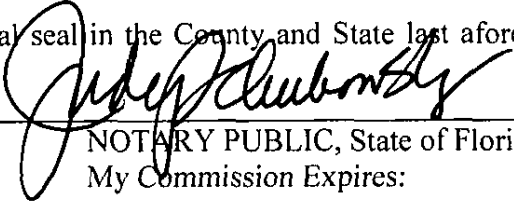
By: 
HAIM ALTIT, as sole Member and Manager

STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared **HAIM ALTIT** who is ☒ personally known to me to be the person described in and who executed the foregoing instrument or ☐ who has produced _____ as identification and who swore and acknowledged before me that they executed the same, and who took an oath.

28 WITNESS my hand and official seal in the County and State last aforesaid this day of May, 2008.




NOTARY PUBLIC, State of Florida
My Commission Expires:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA