

203 0000 26714

Division of Corporations
New York State
Division of Corporations
Electronic Filing Cover Sheet

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H150000772143ABC.

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To:

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

From:

Account Name : GILMAN CIOCIA INC.
Account Number : I20120000051
Phone : (305)937-7773
Fax Number : (815)301-2897

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

Email Address: Steven.levy@gtax.com

RECEIVED

15 MAR 31 AM 10:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MY DARLING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

15 MAR 31 AM 8:55

FILED

J. Stevens APR 01 2015

COVER LETTER

TO: Registration Section
Division of Corporations

H15 0000772143

SUBJECT: MY DARLING, 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:

STEVE Z. LEVY

Name of Person

Firm/Company

5566 SW 28TH TERRACE

Address

FORT LAUDERDALE, FL 33312

City/State and Zip Code

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

For further information concerning this matter, please call:

STEVE Z. LEVY

Name of Person

at

Area Code

954 296-8980

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)

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15 MAR 31 AM 10:00

REGISTRATION SECTION
BUREAU OF COMMERCIAL
REGISTRATION SERVICES

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

H15 0000772143

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H150000772143

MY DARLING, 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 07/22/2003 and assigned
Florida document number L03000026716.

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

City

Florida

Zip

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

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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 - Authorized Member

H15 0000772143

Title	Name	Address	Type of Action
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MGR	RAFI LEVY	5566 SW 28TH TERRACE	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33312	<input checked="" type="checkbox"/> Remove

MGR	PEARL BEN YORAM	3749 SW 51 STREET	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE, FL 33312	<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
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated MARCH 26 2015


Signature of a member or authorized representative of a member

STEVE Z. LEVY

member
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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FLORIDA DEPARTMENT OF STATE
MAR 31 2015

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