## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document,

(((H12000234428 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : KATZ BASKIES LLC

Account Number : I20080000071

Phone

: (561)910-5700

Fax Number

: (561)910-5701

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

	r	(	C
Email:		: CI	_
	-	÷.	3
		~	_
		⊸.'	_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SKIWATER GROUP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

P. 002

H12000234428 3

## COVER LETTER

TO: Registration S Division of Co					
SUBJECT:	Skiwate	er Group, LLC			
		ted Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	SER 25 MARS		
Please return all corresp	ondence concerning this matter	to the following:			
•		Thomas O. Katz			
		Name of Person	<del></del>		
Katz Baskles LLC Firm/Company					
	2255	Glades Road Suite 240W	,		
Boca Raton, FL 33431					
		City/State and Zip Code			
	thoma	s.katz@katzbaskies.com	4		
	E-mail address: (	to be used for future annual report notifica	11011)		
For further information	concerning this matter, please of	all:			
Т	homas Katz		10-5700		
Name	of Person	Area Code & Daytime T	clephone 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)		
			o . conduct.		

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, PL 32301

P. 003

H120002344283

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

. <u></u>	Skiwater Group, LLC		
(Name of the Lin	nited Liability Company as it now appear (A Florida Limited Liability Company)	ers on our records.)	9
·			
The Articles of Organization for this Limit	ed Liability Company were filed on	5/27/2004	and assigned
Florida document number L04000	0040106		
This amendment is submitted to amend the	following:		
A. If amending name, enter the new name	ne of the limited Hability company he	ere:	
The now name must be distinguishable and en "L.L.C."	d with the words "Limited Liability Comp	pany," the designation "I	LC" or the abbreviation
Enter new principal offices address, if ap	oplicable:		
(Principal office address MUST BE A ST.	REET ADDRESS)		
Enter new mailing address, if applicable	·		
(Mailing address MAY BE A POST OFF)	(CR BOX)		
B. If amending the registered agent : registered agent and/or the new registered	and/or registered office address on ed office address here:	our records, <u>enter</u> (	he name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Es	nter Florida street add	ress ·
		, 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.

If Changing 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>Address</u> Name Type of Action MGR Alan Azizollahoff Add 20900 NE 30 Avenue Aventura FL 33180 Remove ☐ Add Remove ∏Add Remove ∏ Add Remove □Add Remove Add Remove . D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated\_

> Typed or printed name of signee Page 2 of 2

Thomas O. Katz

authorized representative of a member

Signature of a months

Filing Fee: \$25.00