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EXAMINER



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IN JAN 21 PM 2: 52

COVER LETTER

Division of Co		ele Augnus III C		
SUBJECT:		rk Avenue, LLC ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please return all correspondence	ondence concerning this matter	r to the following:		
		Mitchell Rubinson		
Name of Person				
Integrated Equities Firm/Company				
		3525 Flamingo Drive		
	<u> </u>	Address		
	M	liami Beach, FL 33140		
City/State and Zip Code				
	E-mail address:	Lusti23@gmail.com to be used for future annual report of	notification)	
For further information	concerning this matter, please	,		
	nael Lustigman	at (_305_)	299-0903	
Name	of Person	Area Code & Da	ytime 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)	Section 1 Section 1 Section 2 Sectio	
	LING ADDRESS:	STREET/CO	URIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2228 Park A	venue, LLC_			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appear iability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Company	were filed on	1/31/2005	and assigned	
Florida document number L05000010194				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liah	oility company her	<u>e</u> :		
The new name must be distinguishable and end with the words "Limit"L.L.C."	ited Liability Compar	ny," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable:	2228 Park Av	enue	F (1)	
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach,	FL 33139		
			SS To prove	
Enter new mailing address, if applicable:	PO Box 1900	89	Te R IM	
(Mailing address MAY BE A POST OFFICE BOX)	Miami Beach, FL 33119		2:52 SINTE NIBA	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ur records, <u>enter</u>	the name of the new	
Name of New Registered Agent:	MEND MENT			
New Registered Office Address:		er Florida street ac	Idress	
	, 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

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Todd M. Glaser	P.O. Box 402249 Miami Beach, FL 33140	Add Remove
<u>MGRM</u>	Integrated Equities, Inc	PO Box 190089 Miami Beach, FL 33119	Add Remove
<u>MGRM</u>	The L4 Group, Inc.	4027 194th Trail Sunny Isles Beach, FL 33160	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, ent	er change(s) here: (Attach additional sheets, if necessary.)	_
Dated	January 14	,2011	_
	Signature of	amember of authorized representative of a member Michael Lustigman	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00