

LOS 000025063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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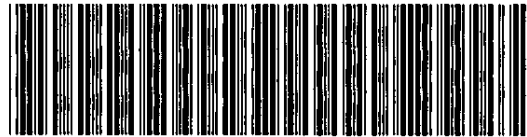
(Business Entity Name)

(Document Number)

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2012 AUG -6 PM 1:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

T. CLINE  
AUG - 7 2012  
EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ARTHUR LAND LC  
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:

GILBERT JEFFREY ELIAN

Name of Person

ARTHUR LAND LC

Firm/Company

8261 Azure Coast Blvd

Address

Lake Worth, FL 33467

City/State and Zip Code

ophmdge@gmail.com

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

For further information concerning this matter, please call:

GILBERT JEFFREY ELIAN

Name of Person

at ( 561 )

779-4265

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

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TALLAHASSEE, FLORIDA

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

**ARTHUR LAND LC**

(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 03/14/2005 and assigned  
Florida document number L05000025063.

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)

8261 Azure Coast Blvd

Lake Worth FI 33467-6957

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8261 Azure Coast Blvd

Lake Worth FI 33467-6957

**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:

GILBERT JEFFREY ELIAN

New Registered Office Address:

8261 Azure Coast Blvd

*Enter Florida street address*

Lake Worth

*City*

, Florida

33467-6957

*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>	<u>Address</u>	<u>Type of Action</u>
MGR	GILBERT JEFFREY ELIAN	8261 Azure Coast Blvd Lake Worth FL 33467-6957	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	GELMAN - ELIAN, LANA	15857 VIVANCO ST DELRAY BEACH FL 33446	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	GILBERT JEFFREY ELIAN	8261 Azure Coast Blvd Lake Worth FL 33467-6957	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	GELMAN - ELIAN, LANA	15857 VIVANCO ST DELRAY BEACH FL 33446	<input checked="" 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.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated August 3, 2012

Signature of a member or authorized representative of a member

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
12 AUG -6 PM 1:16

FILED