Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : ALECO HARALAMBIDES, P.A.

Account Number : I20140000069 Phone : (305)854-5206 Fax Number : (305)854-1087

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MANGLAR, L.L.C.

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EXAMINER

11/20/2018

Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

10:	Division of Corp		;		•
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SUBJE	C1	Name of Limi	ted Liability Company		
		Amendment and fee(s) are sub-			
1 100001	oran an omicspor	URANIA DOUCAS	.c. and toneg.		
			Name of Person		•
			Firm/Company		
100 S PINE ISLAND RD SUITE 202					
		PLANTATION, FL 33324	Address		
		aleco@ajhfirm.com	City/State and Zip Code		
		E-mail address: (to be used for future annual report not	fication)	
For fur	ther information co	oncerning this matter, please or	all:	Ž,	23
Aleco	Haralambides, Esq	l.	305 \$54-\$206	72 <u>1</u> 2 1	
Name of Person Area Code Daytime Telephone Number					1 :_ 1 2018 NOV 20
Enclose	ed is a check for th	e following amount:			PR [T]
\$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Securificate of State	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FU 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

MANGLAR, L.L.C.						
(Name of the Limi	ited Liability Compai (A Florida Limited L	ny as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited L	Liability Company	were filed on 4/29/2015	au	nd assign	ned	
Florida document number L05000042469	<u> </u>					
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name of	of the limited liabi	ility company here:				
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company." the designation "LLC" or th	e abbreviati	on "L.L.C	1 11	
Enter new principal offices address, if applicable:		(NO CHANGE)				
(Principal office address MUST BE A STRE	ET ADDRESS)					
Enter new mailing address, if applicable:		(NO CHANGE)				
(Mailing address MAY BE A POST OFFICE	E BOX)					
			<u> </u>	2878		
B. If amending the registered agent and	d/or registered of	ffice address on our records, <u>en</u>	ter the n	ame of	the nev	
registered agent and/or the new registered of	office address hen	<u></u>	SSE	20	F	
Name of New Registered Agent:	(NO CHANGE)		PR.	<u> </u>	
			.0a			
New Registered Office Address:		Enter Florida street address		=		
			, Florida			
		City	Zip	Code		
New Registered Agent's Signature, if changing					والعامة والماء	
I hereby accept the appointment as register provisions of all statutes relative to the pro-	red agent and agr ver and complete	ee to act in this capacity. I flutiner performance of my duties, and I d	agree to ım familic	ar with c	with the and	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to compty 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

. . .

<u>Title</u>	Name	Address	Type of Action
MGR	DOUCAS, MELETIOS	309! NE 45TH STREET	
		FORT LAUDERDALE, FL 33308	■ Remove
			□ Change
MGR	reppas, Michael J., ESQ.	100 S PINE ISLAND RD, SUITE 202	
		PLANTATION, FL 33324	= Remove
			□ Change
MGR	DOUCAS, URANTA	100 S PINE ISLAND RD, SUITE 202	
		PLANTATION, FL 33324	□ Remove
			Change
			☐ Remove
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effective date is listed, the date must be specific and et. If the date inserted in this block does not unment's effective date on the Department of the second sec	d cannot be prior to meet the applicab	date of filing or more le statutory filing re	than 90 days after filing	g.) Pursuu	nt to 605.6 Libe liste
record specifies a delayed effective one 90th day after the record is filed.	date, but not a	an effective tim	ie, at 12:01 a.m.	on the	: earlie
NOVEMBER 19TH	2018				
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