# L05000045499

(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
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SECRETARY OF STATE

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SEP 15 2011

**EXAMINER** 



## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 6, 2011

ROLAND FAITH 2627 NE 203RD ST. #118 AVENTURA, FL 33180

SUBJECT: SOHO STUDIOS LLC Ref. Number: L05000045499

We have received your document for SOHO STUDIOS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 711A00020583

2011 SEP 14 PM 1: 25

# **COVER LETTER**

TO:	Registration Section Division of Corporation					٠
SUBJE	CCT:	SOHO S	STUDIOS ALC ited Liability Company			
The en	closed Articles of Am	endment and fee(s) are sub	omitted for filing.			
Please	return all corresponde	ence concerning this matter	to the following:			
		ROLANC	Name of Person			
	-	SOHO S	STUDIOS LLC Firm/Company			
	-	2627 NE	20380 ST. #11	8		
	-	AVENTURA	FL 33 180 City/State and Zip Code		2011 SEP 14 PM 1: 205 SECRETARY OF STATE TALL'AHASSEE, FLORID.	~T
	-	ADRIADPER L E-mail address: (1	to be used for future annual report notifica	tion)	P I L TARY TASSE	
For fur	her information conc	erning this matter, please c	all:		OF SI	
AC	Name of Pe	ER L MAD	at ( 305 632 - 499 Area Code & Daytime T	R   Telephone Number	DRIDA DRIDA	
Enclose	d is a check for the fi	ollowing amount:			•	
<b>K</b> (\$25	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate of Certified Co (additional)	of Status &	

### 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

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

(Name of the Limited Liability (A Florida Li	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Co	empany were filed on $\frac{5}{9}$ and assigned.
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ed liability company here:
The new name must be distinguishable and end with the words "L.L.C."  Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRE  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SESSION SEPTIMENTAL AVENTURA FL 33180
B. If amending the registered agent and/or register registered agent and/or the new registered office addre	red office address on our records, enter the name of the nev
Name of New Registered Agent: ΚΞ	VID FAITH
New Registered Office Address: 2627	) NE 203CO STREET 井川る Enter Florida street address
_ A √2	Florida 33180  City Zip Code
New Registered Agent's Signature, if changing Registered A	•

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 plat 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
MCRM	F.A.Y. S. LLC	2627 NE 20300 ST. #18 ATENTURA, FL 33180	Add Remove
MGRM	YVES BARROUKH	460 W. 43RO ST. MIAMI BEACH, FL 33140	Add Remove
			Add Remove
			Add Remove
	<del></del>		Add Remove
			Add Remove
D. If amendi	ng any other information, enter change	- [	
Dated	Pkm.		
_	Signature of a member	or authorized representative of a member	
_	Typed o	or printed name of signee	<del></del>

Page 2 of 2

Filing Fee: \$25.00