

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Fax Number : (850)617-6383

From:

Account Name : SERBER & ASSOCIATES, P.A.

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4/24/2015

COVER LETTER

TO:

Registration Section Division of Corporations

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SHUFFLE INVESTMENTS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please (eturn all correspondence concerning this matter to the following:

Daniel J. Serber

Name of Person

Serber & Associates, P.A.

Firm/Company

2875 NE 191st Street, Suite 801

Additoss

Aventura, FL 33180

City/State and Zip Code

info@serberlawfirm.com

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

For further information concerning this matter, please call:

Yolanda L. Fornaris

305, 932-6262

Name of Porson

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)

MAHANG ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallelussee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

2003/005

2015 APR 27 AM 8 20

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE TALLAHASSEE, FLORIDA

SHUFFLE INVESTMENT			
(Same of the Lim	ted Lighillty Company a (A Florida Limited Light	ity Company)	
The Articles of Organization for this Limited I Florida document number L05000050178		e filed on 05/20/2005	ind assigned
This amountment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability	company here:	
The new name must be distinguishable and end with the	words "Limited Linbility	Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	وروا سورون سندادا وروس والمستوادة سروبوري ومستراه والمتادر	
(Principal office address MUST BE A STREE	ET ADDRESS)	ipyma amaa metamaa mii jii dhili y an ilii liqqiin 17 Rama ebbyyyaye ayan asanya ami'diga e	and had a species with referred to process and they become the weather and become the species and the species are the species and the species are the species and the species and the species and the species
	-		The analysis of the agreement of the special of the second
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:	or registered office		
		•	
			Zip Code
dew Registered Agent's Signature, if changing [Registered Agent:		•
hereby accept the appointment as registore from some of all statutes relative to the propercient the obligations of my position as registing filed to merely reflect a change in the company has been notified in writing of this	er and complete perfi stered agent as provi registered office addr	ormance of my duties, and I am ded for in Chapter 605, F.S. Ot	familiar with and , if this document is
:	If Changing	togistered Agent, Signature of New B	teristered Arent
	D 1 - 64		

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member				
Title	<u>Name</u>	Address	Type of Action	
MGR	Nir Shoshani	1111 Park Centre Blvd Suite 450		
		MIAMI, FL 33169	Remove	
AR	S & A Company Management, LLC	2875 NE 191st Street, Suite 801	 6 Add	
		Aventura, FL 33180	[] Kemove	
				
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or it make thing they street into makeing enter charactery nere. (Attach this inches sieces, 1) necessary.)
1) The management of the Limited Liability Company is reserved to the
members.
E. Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to the date of receipt or filed date and cannot be more han 90 days after the date this document is filed by the Florida Department of State.
Dated April 09
Signature of a member or authorized representative of a member
Nir Shoshani - Manager

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