

L06000085587

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EXAMINER



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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV - 4 AM 10:51

LAW OFFICES
JOEL A. SAVITT
PROFESSIONAL ASSOCIATION
SUITE 506 • 20801 BISCAYNE BOULEVARD
AVENTURA, FLORIDA 33180

JOEL A. SAVITT
DAVID C. SAVITT

TELEPHONE 305.936.8844 Ext. 101
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E-MAIL: SAVITT@MINDSPRING.COM

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Via Federal Express

November 3rd, 2011

Florida Department of State
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

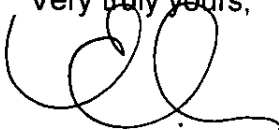
Re: **Downs & County Line, L.L.C.**, a Florida limited liability company
Our File No.: 11-083

Ladies/Gentlemen:

Enclosed please find the original and a copy of the Articles of Amendment to the Articles of Organization for Downs & County Line, L.L.C., a Florida limited liability company. Also enclosed please find a check in the amount of \$60.00 payable to the Florida Department of State. This check represents payment as follows:

- i. \$25.00 Filing Fee for Articles of Amendment to the Articles of Organization.
- ii. \$30.00 Certified Copy.
- iii. \$ 5.00 Certificate of Status.

Very truly yours,



Erica Smolyansky
Executive Legal Assistant to Joel A. Savitt

JAS:es
Enclosures as stated

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Downs & County Line, L.L.C.
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Joel A. Savitt, Esq.

Name of Person

Joel A. Savitt, P.A.

Firm/Company

20801 Biscayne Boulevard, Suite 506

Address

Aventura, Florida 33180

City/State and Zip Code

savitt@mindspring.com

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

For further information concerning this matter, please call:

Joel A. Savitt, Esq.

Name of Person

at (305)

936-8844

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

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

Downs & County Line, L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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DIVISION OF CORPORATIONS
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The Articles of Organization for this Limited Liability Company were filed on August 28, 2006 and assigned
Florida document number L06000085587.

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:

16047 Collins Avenue

(Principal office address MUST BE A STREET ADDRESS)

Suite 602

Sunny Isles Beach, Florida 33160

Enter new mailing address, if applicable:

16047 Collins Avenue

(Mailing address MAY BE A POST OFFICE BOX)

Suite 602

Sunny Isles Beach, Florida 33160

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:

Joel A. Savitt, Esq.

New Registered Office Address:

20801 Biscayne Boulevard, Suite 506

Enter Florida street address

Aventura

, Florida

33180

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:

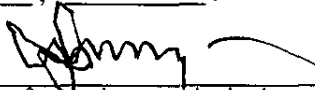
MGR = Manager

MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------------|---|--|
| MGRM | Esther Bendoim | 19333 Collins Avenue Apt 810 Sunny Isles Beach, Florida 33160 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| MGRM | Mark Finkelshtein | 16047 Collins Avenue Suite 602 Sunny Isles Beach, Florida 33160 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| PRES | Esther Bendoim | 19333 Collins Avenue Apt 810 Sunny Isles Beach, Florida 33160 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| | | | <input 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 November 3, 2011



Signature of a member or authorized representative of a member

Mark Finkelshtein

Typed or printed name of signee