

FROM

(MON) JUL 12 2010 4:03/ST. 4:02/No. 8160081372 P 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L06000103612

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Division of Corporations
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From:

Account Name : DAVID TORCHIN, C.P.A., P.A.
Account Number : I19990000007
Phone : (954) 472-3124
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
S & E CAPITAL, LLC**

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D. BRUCE

JUL 13 2010

EXAMINER

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Corporate Filing Menu

Help

FROM

(MON) JUL 12 2010 4:03/ST. 4:02/No. 8160081372-P 2

H100001599223

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

S A E Capital, LLC

(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 10/24/2006 and assigned
Florida document number L06000103612

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Oskel Svorai

New Registered Office Address:

(Enter Florida street address)

Florida

(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)

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FROM

(MON) JUL 12 2010 4:03/ST. 4:02/No. 9160081372 P 3

H100001599223

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

Title	Name	Address	Type of Action
MGRM	Dror Svorai	1065 Lyontree St Hollywood, FL 33019	☐ Add ☒ Remove
MGRM	Dekel Svorai	1065 Lyontree St Hollywood, FL 33019	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Dated July 12, 2010

Signature of a member or authorized representative of a member

Dekel Svorai

Typed or printed name of signer

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