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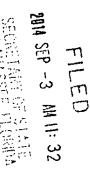
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· COVER LETTER

TO: **Registration Section** Division of Corporations

GOLDEN KEY PLAZA, LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

BRONYA GLAZER

Name of Person

BG BOOKKEEPING, INC

Firm/Company

26 DIPLOMAT PKWY

Address

HALLANDALE BEACH FL 33009

City/State and Zip Code

bgbookkeepingtax@aol.com

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

For further information concerning this matter, please call:

BRONYA GLAZER

 $\text{at} \underbrace{(954)}_{\text{Area Code}} \underbrace{4567474}_{\text{Daytime Telephone Number}}$

Name of Person

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

FILED

2814 SEP -3 AM II: 32

SECRETARY OF STATE TALLAHASSEF, FLORIDA

OOLDEN KET FLAZA, LLC	
(Name of the Limited Liabili (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number L07000064932	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	ited liability company here:
The new name must be distinguishable and end with the words "Lie	mited 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 ADDI	RESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, enter the name of the new ress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida

New Registered Agent's Signature, if changing Registered Agent:

COLDENKEY DI AZA LLC

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 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.

City

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR IGO	IGOR GORODETSKY	16500 COLLINS AVENUE #145	5 1 ≡ Add
		SUNNY ISLES BEACH FL 3316	60 ☐ Remove
AMBR VII	VIKTORIA SERDYUK	16500 COLLINS AVENUE #145	 1 <u>■</u> Add
		SUNNY ISLES BEACH FL 3316	60 □ Remove
MGR GOR EXECUTIVE SERVICE, INC	GOR EXECUTIVE SERVICE, INC	16500 COLLINS AVENUE #145	5 1 □ Add
		SUNNY ISLES BEACH FL 3316	O_■ Remove
		NII AMA	□ Add
			□ Remove
			Add
			□ Remove
	·		Add
			□ Remove

If amending any other information, enter	change(s) here: (Attach additional sheets, if necessary.)
·	
the date this document is filed by the Florida Departn	date of receipt or filed date and cannot be more than 90 days after nent of State)
Dated AUGUST 27	2014
	a member or authorized representative of a member
IGOR GORODETSI	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2014 SEP -3 MI II: 32