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COVER LETTER

Division of Corporations
SUBJECT: 321 Beach Place LLC
Division of Corporations SUBJECT: 321 Beach Place 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: Felix Fidelibus Name of Person 321 Beach Place LLC Firm/Company 400 Pack Central Blvd S., #5 Address Pampano Beach FL 33064 Felix Pampano Beach FL 33064 City/State and Zip Code Felix Code CTC Apitalad visors. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Felix Fidelibus Name of Person at (954) 975-314-3 Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy Certificate of Status
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Felix Fidelibus
Name of Person
Firm/Company
Pompano Beach, FL 33064
relix (a CTCA) talad visors. com
,
Velix Fidelibus at (954) 975-3143
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:

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

(A Florida Limited Lia	1 1	
The Articles of Organization for this Limited Liability Company w	vere filed on 08/29/2007	and assigned
Florida document number 107000 88685	, ,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ity company here:	
The new name must be distinguishable and contain the words "Limited Liability Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	y Company," the designation "LLC" or the ab 200 fark Cent Pompano Beach	ral Blvd. S., # L, FL 33064
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	200 Park Central Pompawo Beach,	
B. If amending the registered agent and/or registered office address here:	·	the name of the new
Name of New Registered Agent:	W(A	
New Registered Office Address:	Enter Florida street address	15 OCT
New Designated Access Circulators (Calculators Designated Access)	, Florida	Hip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and I am j vovided for in Chapter 605, F.S. Or,	resto conjuly with the confidence with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> **Address** Type of Action _□ Add _□ Remove _□ Change □ Add □ Remove _□ Change □ Add ☐ Remove Change _□ Remove □ Change _□ Add □ Remove ☐ Change

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an effo Note:	e date, if other than the date of filing: (optional tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing the date inserted in this block does not meet the applicable statutory filing requirements, this date	y g.) Pursuant t e will not be	o 605.02 Listed	207 as
	it's effective date on the Department of State's records.	· · · · · · · · · · · · · · · · · · ·	110100	
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m 90th day after the record is filed.	. on the e	arlier	of
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	9/29/15			
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Typed or printed name of signee

Filing Fee: \$25.00