

LO7000115-297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

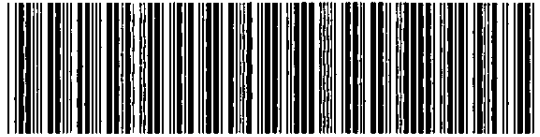
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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11/27 AL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Cedars Consultants 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:

Evron, Uri Z
(Name of Person)

Cedars Consultants LLC
(Firm/Company)

3805 N. 47th Ave
(Address)

Hollywood, Florida 33021
(City/State and Zip Code)

For further information concerning this matter, please call:

Jacky Heby at (305) 785-3344
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Cedars Consultants LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 11-14-07 and assigned document number L07000115297.

SECOND: This amendment is submitted to amend the following:

The address of this LLC is corrected to read

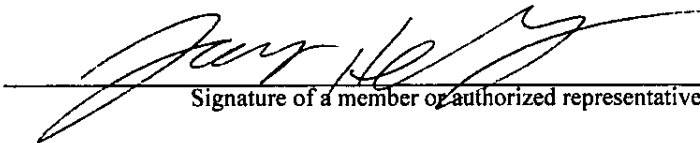
3805 N. 47th Ave

Hollywood, Florida 33021

Change Name of Evron, Uriz correct spelling is Evron

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated November 19th, 2007



Signature of a member or authorized representative of a member

Herby, Jack

Typed or printed name of signee

Filing Fee: \$25.00