L0800014382

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COVER LETTER

	ration Sec on of Corp		•	
	340 WABA	SSO BEACH ROAD, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed A	rticles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return all	correspon	dence concerning this matter	to the following:	
		ROBERT KAHN, ESQ.		
			Name of Person	
			Firm/Company	
		4522 SHERIDAN AVE		
			Address	
		MIAMI BEACH, FL 3314	0	
		ROBERT@GOODEARTH	City/State and Zip Code PROPERTY.COM	" =
		E-mail address: ()	to be used for future annual report notifi	ication)
For further infor	mation co	ncerning this matter, please ca	all:	
ROBERT KAH			786 282-4806 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a ch	eck for the	e following amount:		
■ \$25.00 Filin	g 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
Cliffon Building
2661 Executive Center Circle
Tallahassee, FL 32301



15 AUG 19 PH 3: 31

FLORIDA DEPARTMENT OF STATE ECRETARY OF STATE

FLORIDA DEPARTMENT OF STATE

August 10, 2015

ROBERT KAHN, ESQ 4522 SHERIDAN AVE MIAMI BEACH, FL 33140

SUBJECT: 1840 WABASSO BEACH ROAD, LLC

Ref. Number: L08000014382

We have received your document for 1840 WABASSO BEACH ROAD, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 015A00016488

Attached Find document G'and by athorited Rep.

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

TO ARTICLES OF ORGANIZATION

1840 WABSSO BEACH ROAD, LLC

(Name of the Limited Liability Co (A Florida Lim	mpany as it now appears on our reco	ords.)
The Articles of Organization for this Limited Liability Comp.	pany were filed on	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited I	iability Company," the designation "L	LC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	5)	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		15 15 At
		355 19 · · ·
3. If amending the registered agent and/or registered egistered agent and/or the new registered office address		rds, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ress
	, I	FloridaZip Code

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.

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JAMES H. BAILEY	14831 NW 7 AVE	
		MIAMI, FL 33168	
			Remove
			□ Change
MGR	ROBERT BAILEY	14829 NW 7 AVE	
		MIAMI, FL 33168	□ Remove
			☐ Change
MGR	WABASSO INVESTMENTS LLC	14829 NW 7 AVE	Add
		MIAMI, FL 33168	On ⇒ → → □ Remove
			See 5 5 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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E. Effect	ive date, if other than the date of filing:	(optional) not be prior to date of filing or more than 90 days after filing.	93.5 v	0000 (0)(1
Note:	If the date inserted in this block does not meet	the applicable statutory filing requirements, this date	will not be liste	d as the
docun	ent's effective date on the Department of State'	's records.	0#10 	i i
If the re	cord specifies a delayed effective date	but not an offertive time at 13,01 a.m.	April 1	 .
(b) The	90th day after the record is filed.	, but not an effective time, at 12:01 a.m.	on the earne	er or:
	JULY 29 20	015		
Dated	, _	 ·		
	Signatur of a memb	ber or authorized representative of a member		
	ROBERT KAHN ^L AUTHORIZED REPR			
	ı yp	ed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00