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08 MAR -4 AH II: 20
SECRETARY OF STATE

COVER LETTER

Division of Corporations		
SUBJECT: ABOULAFIA SINCE 1979 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:		
Den en Benliemek		
Ronen BenHarush (Name of Person)		
HLBC		
(Firm/Company)		
2320 Hollywood BLVD		
(Address)		
Hollywood, CA 33020		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Ronen BenHarush at (954) 921 4600 x 229		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount: \$\sum{\$\\$25.00 \text{ Filing Fee } \sum{\$\\$30.00 \text{ Filing Fee & } \sum{\$\\$55.00 \text{ Filing Fee & } \sum{\$\\$60.00 \text{ Filing Fee } \$\\$60.00 \sum{\$\\$60.00 \	۵	
Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	Status &	
MAILING ADDRESS: STREET/COURIER ADDRESS:		

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

08 MAR -4 AM II: 20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(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 Liabi	ility Company were filed on 02/11/2008	and assigned	
Florida document number L08000014983			
Tiona document number	 		
This are and are and is such as idead as a more data to the Callandi			
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company here:		
ABOULAFIA SINCE 1879 LLC			
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Company," the design	ation "LLC" or the abbreviation	
B. If amending the registered agent and/or registered agent and/or the new registered office		enter the name of the new	
Name of New Registered Agent:			
No. Designation Address			
New Registered Office Address:	(Enter Florida street address)		
	·	,	
-		ida (Zip Code)	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regi	istered Agent:		
I hereby accept the appointment as registered a the provisions of all statutes relative to the prop accept the obligations of my position as register being filed to merely reflect a change in the reg- company has been notified in writing of this cha	per and complete performance of my duties, red agent as provided for in Chapter 608, F. istered office address, I hereby confirm that	and I am familiar with and S. Or, if this document is	

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 = Ma MGRM = I	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			AddRemove
			Add
D. If amen	nding any other information, enter o	change(s) here: (Attach additional sheets, i	f necessary HAS
			AM II: 20 REEFILORIO
_			
Dated	Fsh 19 ,	2008	
	Cur Cignature of a m	ember or authorized representative of a member	er .
	Oran Yaul	M GR Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00