L080000807/7

| (Req | questor's Name) | | |
|---|------------------|-----------|--|
| (Add | lress) | | |
| (Add | Iress) | | |
| (City | /State/Zip/Phone | e #) | |
| PICK-UP | WAIT | MAIL | |
| (Business Entity Name) | | | |
| (Doc | cument Number) | | |
| Certified Copies | Certificates | of Status | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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SEURE KARY OF STATE
TALL AHASSEE FLORIGA

C. LEWIS OCT 172008 EXAMINER

COVER LETTER

| TO: Registration Se Division of Cor | | | | |
|--|---|--|---|--|
| suвject: <mark>BEACH</mark> | BOYS OF FT. LAU | JDERDALE, LLC ited Liability Company) | I | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | | |
| Please return all correspo | ndence concerning this matter | to the following: | · | |
| | DIMITRIOS TSIAKANIK | (Name of Person) | | |
| | BEACH BOYS OF FT. L | | | |
| · | | (Firm/Company) | | |
| | 413 S FORT LAUDERDA | ALE BEACH BLVD. (Address) | | |
| | FORT LAUDERDALE, F | L 33316 (City/State and Zip Code) | | |
| For further information co | oncerning this matter, please c | all: | | |
| DIMITRIOS TSIAKANIKAS (Name of Person) | | at (_954_) 448-2316 (Area Code & Daytime Telephone Number) | | |
| Enclosed is a check for th | e 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:

TO:

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

2000 OCT 16 PM 1:48

SECRETARY OF STATE TALLAHASSEE, FLORIDA

BEACH BOYS OF FT. LAUDERDALE, LLC

(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 Liability | y Company were filed on AUGUST 22, 20 | 008 and assigned | |
|--|---|-----------------------------------|--|
| Florida document number L08000080717 | · · · · · · · · · · · · · · · · · · · | | |
| This amendment is submitted to amend the following | ; | | |
| A. If amending name, enter the new name of the I | imited liability company here: | | |
| The new name must be distinguishable and end with the v"L.L.C." | words "Limited Liability Company," the desig | gnation "LLC" or the abbreviation | |
| Enter new principal offices address, if applicable: | | | |
| (Principal office address MUST BE A STREET AD | | | |
| | | · | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | |
| B. If amending the registered agent and/or regregistered agent and/or the new registered office agent. | gistered office address on our records, ddress here: | enter the name of the new | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | (Enter Florida street address) | | |
| | ···· | orida | |
| | (City) | (Zip Code) | |

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

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 608, 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 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 = Manager MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | Address | | Type of Action |
|--------------|----------------|-----------------------------------|--|----------------|
| MGRM | KRENAR ALUSHAN | | ORT LAUDERDALE BEACH BLVD. UDERDALE, FL 33316 | Add Remove |
| | | | | Add Remove |
| - | | | | Add Remove |
| · | | | | Add Remove |
| | | | | Add Remove |
| | | | | Add Remove |
| D. If ar | | on, enter change(s) here: (At | tach additional sheets, if necessary.) | _ |
| | KEVORKIAN. | | | _ |
| | | | TALLAHASS | |
| Dated _ | OCTOBER 14 | , <u>2008</u> . | ASSEE, FLORID | |
| | | ature of a member or authorized r | representative of a member | |
| | | Typed or printed name | e of signee | |

Page 2 of 2

Filing Fee: \$25.00