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ALLAHASSEE, FLORIDA

FILED

S. HAWKES

AUG 2 5 2009

EXAMINER

COVER LETTER

Division of Con			
SUBJECT: F	PAZIT PROPERTIES	S, LLC	
	(Name of Lim	ited Liability Company)	· · · · · · · · · · · · · · · · · · ·
		•	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
		Jeffrey M. Stephens	
		(Name of Person)	······································
		Stephens Law Firm, P.A.	
		(Firm/Company)	
	45	507 Furling Lane, Suite 210	
		(Address)	
		Destin, FL 32541	·
		(City/State and Zip Code)	
For further information of	concerning this matter, please o	ali:	
	. Stephens	at (_850_ ₎ 837-7135	
(Name	of Person)	(Area Code & Daytime 7	'elephone Number)
Enclosed is a check for t	he following amount:		•
2 \$25.00 Filing Fee	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tailahassee, 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

	PAZIT PROPERTIES, LLC		
(Name of the L	mited Liability Company as it now an (A Florida Limited Liability Compa	pears on our records.)	
	(A Plonda Limited Liability Compa	· (Vi	7.0 %
The Articles of Organization for this Limit	ited Liability Company were filed on	September 26, 2008	and assigned
Florida document number L08000	091879		
1 toriga accument municor	•		· 555 - 1
			36 3
This amendment is submitted to amend the	ne following:		
A 16		hans	िन्न पूर
A. If amending name, enter the new na	ime of the finited hability company	nere:	- E- C
			37
The new name must be distinguishable and e "L.L.C."	end with the words "Limited Liability Co	mpany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if	applicable:		
(Principal office address MUST BE A S	TREET ADDRESS)		

			•
Enter new mailing address, if applicable	le:		
(Mailing address MAY BE A POST OF)	FICE BOX)		
			· · · · · · · · · · · · · · · · · · ·
	 ,		· · · · · · · · · · · · · · · · · · ·
D If amending the projectional agent	and for maintained account and and		
B. If amending the registered agent registered agent and/or the new register	and/or registered office address (on our records, <u>enter ti</u>	ie name of the new
LEBOTE FOR MEST UNITED THE DEAT LEBSTE	ted only sources nete.		
Name of New Registered Agent	4 *	<u></u>	
11 m 1 . 1000 . 11			
New Registered Office Address:		(Enter Florida street add	
		(Erust Liorida sireel add	ress)
		, Florida	
	(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 Changing Registered Agent, Signature of New Registered Agent)

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>	Name	Vqques	Type of Action
Manager	Roten Dahan	4505 Belibuoy Landing Destin, FL 32541	☑ Add □ Remove
	·		Add Remove
			Add Removes
			Addi 55
 :-			Add Remove
			Add Remove
D. If amend	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	
			-
	7-1-09		
	Pal T. Signature of a nember	Unplut Z	
	Турес	Pazit Kleinplatz or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00