

✓
L08000095822

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

AUG 19 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Formtec Water Products 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:

Amir Reiter
Name of Person

Formtec Water Products LLC
Firm/Company

1940 NE 194th Dr.
Address

N. Miami Beach, FL 33179
City/State and Zip Code

amir.reiter@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amir Reiter at (305) 915-8920
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the 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:
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

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TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Formtec Water Products 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 Company were filed on 10/09/2008 and assigned
Florida document number L08000095822.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The Reiter Group LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1940 NE 194th Dr.
N. Miami Beach, FL 33179

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Amir Reiter

New Registered Office Address:

1940 NE 194th Dr.

Enter Florida street address

N. Miami Beach, Florida FL 33179
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.

Amir Reiter
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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mr.	Amir Reiter	1940 NE 194th Dr. N. Miami Beach, FL 33179	<input checked="" type="checkbox"/> Add MGRM <input type="checkbox"/> Remove
Mr.	Ariel Reiter MGRM	1940 NE 194th Dr. N. Miami Beach, FL 33179	<input type="checkbox"/> Add MGRM <input checked="" type="checkbox"/> Remove
Mr.	Gideon Reiter MGRM	1940 NE 194th Dr. N. Miami Beach, FL 33179	<input type="checkbox"/> Add MGRM <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

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Dr. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated July 28, 2013



Signature of a member or authorized representative of a member

Ariel Reiter MRM

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 2, 2013

AMIR REITER
1940 NE 194TH DRIVE
N. MIAMI BEACH, FL 33179

SUBJECT: FORMTEC WATER PRODUCTS LLC
Ref. Number: L08000095822

2013 AUG 16 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

We have received your document for FORMTEC WATER PRODUCTS 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):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

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.

Barbara Bostick
Regulatory Specialist II

Letter Number: 213A00018642