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2010 JUL 13 AMIT: 41
SECRETARY OF STAFE

JUL 1 4 2010 EXAMINER

COVER LETTER

TO: Registration Se Division of Co		\	
•	_	1	
SUBJECT:	4356 TWONTY-L	TIGHTH ASSUE, NTES (C)	<u> </u>
	Name of Limi	ited Liability Company	• •
• (•		• •
The enclosed Articles of	Amendment and fee(s) are sub		
Please return all correspondent	ondence concerning this matter	to the following:	•
	Jerme	A. Bernen	
		Name of Person	
g week a see a see gage	<u>. بر د ادم رس</u> د	Firm/Company	A CONTRACTOR OF THE CONTRACTOR
	22 Par	Address	
		Address	
	WALLOW	NJ 07059 City/State and Zip Code	
		City/State and Zip Code	
	Bernmer Fr E-mail address: (to be used for future annual report notificat	ion)
For further information	concerning this matter, please o	call:	
Jerme	A-BORNAN	at (905) 727 - 58 & Area Code & Daytime To	0
Name o	of Person	Area Code & Daytime To	elephone Number
Enclosed is a check for t	he 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)
MAW	INC ADDRESS.	etdeet/colidied	A ANDESS.

MAILING 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

FILED

		2010 JUL 13 AM II: 41
4356 TWENTY-E	IGNTH ASSOCIA	THE CONTRACT STATE
(Name of the Limited Liability Co (A Florida Lim	mpany as it now appointed Liability Company	pears on our records CORETARY OF STATE DEAR ON OUR RECORDS TALLAHASSEE, FLORIDS
		•
The Articles of Organization for this Limited Liability Com	pany were filed on _	Decombon 18 2008 and assigned
Florida document number <u>L 08000 1150 45</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company b	<u>here</u> :
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Con	mpany," the designation "LLC" or the abbreviat
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		on our records, <u>enter the name of the n</u>
Name of New Registered Agent:		- Addition to the state of the
New Registered Office Address:		Enter Florida street address
	Linei 1 wituu 30 eet uuu ess	
	, Florida City Zip Code	
	•	Zip Code
New Registered Agent's Signature, if changing Registered A	gent:	
I hereby accept the appointment as registered agent and	d goree to act in this	is canacity. I further goree to comply with
the provisions of all statutes relative to the proper and		

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 **Type of Action Address** Title Name 13432 157 The COURT NORTH JUPITON FARMS FL. 33478 METERN J BENMAN ☐ Add Remove ☐ Add Remove ☐ Add ☐ Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) JUNE 18 2010 Dated ____ Signature of a member or authorized representative of a member

> Terefree A. Derman Typed or printed name of signee Page 2 of 2

> > Filing Fee: \$25.00