

L09000011077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

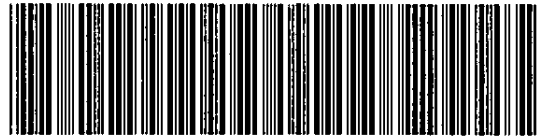
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300142232493

02/09/09--01013--011 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 FEB -9 PM 2:34

T. HAMPTON

FEB 10 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Banc Sales 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:

David Katz

(Name of Person)

Banc Sales LLC

(Firm/Company)

4301 S. Flamingo Road Suite 103-147

(Address)

Davie, FL 33330

(City/State and Zip Code)

For further information concerning this matter, please call:

David Katz

(Name of Person)

at (954) 557-2865

(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

Banc Sales LLC

The Articles of Organization for this Limited Liability Company were filed on 2/3/2009 and assigned Florida document number L09000011077.

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4301 S. Flamingo Road

Suite 103-147

Davie, FL 33330

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:**New Registered Office Address:**

(Enter Florida street address)

_____, **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

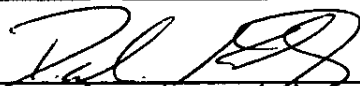
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Sheryl Zedeck Katz	4301 S. Flamingo Road	☒ Add
		Suite 103-147	☐ Remove
		Davie, FL 33330	☐
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 09 FEB - 9 PM 2:34

Dated February 5, 2009



 Signature of a member or authorized representative of a member

David Katz

Typed or printed name of signee