

L090000037063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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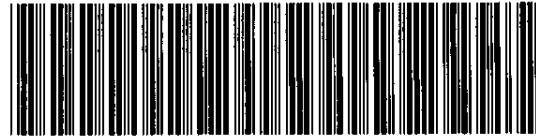
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

MAY 25 2011

EXAMINER

FROM :Legal Assistant

FAX NO. :5616848619

May. 24 2011 02:47PM P 1

Amendment

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: 307 East 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:

Joseph Shamy
Name of Person

307 East LLC
Firm/Company

307 East Atlantic Avenue
Address

Delray Beach, Florida 33483
City/State and Zip Code

Joseph Shamy <josephshamy@gmail.com>
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph Shamy at (561) 271-3973
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

Fares
561-452 0022

FAX TO 245-6030
854-
attn: Barbara

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11 MAY 24 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

307 EAST 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 April 16, 2009 and assigned
Florida document number L09000037063.

This amendment is submitted to amend the following:

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

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)

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: Paddy McGees LLC

New Registered Office Address: 307 East Atlantic Avenue

Enter Florida street address

Delray Beach

Florida

33483

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	PADDY MCGEES LLC	307 East Atlantic Ave Delray Beach, Florida 33483	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Cindy Spallone	307 East Atlantic Ave Delray Beach, Florida 33483	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Cindy Spallone has Resigned as Managing Member and Registered Agent.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAY 24 PM 1:48

FILED

Dated May 2, 2011

Signature of a member or authorized representative of a member

Joseph Shamy

Typed or printed name of signee

THOMAS FARESE