

209000041371

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

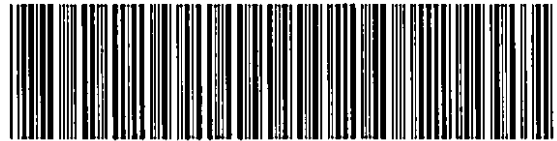
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300316655133

08/10/18--01:29--0000 \*2010.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 AUG 10 AM 9:25

N COOPER

AUG 15 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 54FL.2 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:

Gil Sternbach

---

Name of Person

Leverage Corporate Strategy	
Firm/Company	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
15	15
16	16
17	17
18	18
19	19
20	20
21	21
22	22
23	23
24	24
25	25
26	26
27	27
28	28
29	29
30	30
31	31
32	32
33	33
34	34
35	35
36	36
37	37
38	38
39	39
40	40
41	41
42	42
43	43
44	44
45	45
46	46
47	47
48	48
49	49
50	50
51	51
52	52
53	53
54	54
55	55
56	56
57	57
58	58
59	59
60	60
61	61
62	62
63	63
64	64
65	65
66	66
67	67
68	68
69	69
70	70
71	71
72	72
73	73
74	74
75	75
76	76
77	77
78	78
79	79
80	80
81	81
82	82
83	83
84	84
85	85
86	86
87	87
88	88
89	89
90	90
91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

4935 Kensington Circle

---

Address

Coral Springs, FL 33076

---

City/State and Zip Code

Gil.Sternbach@LeverageCorporateStrategy.com

---

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gil Sternbach	954	263-6336
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

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

54FL2 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 04-29-09 and assigned  
Florida document number L09000041371.

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 contain 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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 AUG 10 AM 9:25

**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: Leverage Corporate Strategy

New Registered Office Address: 4935 Kensington Circle

*Enter Florida street address*

Coral Springs, Florida 33076

*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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

**MGR = Manager**

**AMBR = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Matt Stolba	11983 Tamiami Trail N.	<input type="checkbox"/> Add
		Suite 100F	<input checked="" type="checkbox"/> Remove
		Naples, FL 34110	<input type="checkbox"/> Change
MGR	54FL LLC	11983 Tamiami Trail N.	<input checked="" type="checkbox"/> Add
		Suite 100F	<input type="checkbox"/> Remove
		Naples, FL 34110	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

18 AUG 10 AM 9:25

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 AUG 10 AM 9:25

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated Aug. 7. 2018

Gil Sternbach - MGR of 54FL LLC

**Filing Fee: \$25.00**