## L09000048131

(Requ	uestor's Name)			
(Addr	ess)	·		
(Addr	ess)			
(City/	State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Docu	ıment Number)	<del></del>		
Certified Copies	Certificates	s of Status		
Special Instructions to Fi	ling Officer:			
<del> </del>				

Office Use Only



800180532748

05/07/10--01039--005 \*\*25.00

2010 HAY -7 PHE: 2
SECRETARY OF STATE
ORDER

SECRETARY O

T. CLINE

MAY 10 2010

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT:		Ory Cleaner LLC ed Liability Company	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>		
The enclosed Articles o	f Amendment and fee(s) are subn	nitted for filing.			
Please return all corresp	ondence concerning this matter t	o the following:			
	Je	remy A. Cohen Esq., Name of Person	<del></del>	-	
	C	ohen & Owens, P.A. Firm/Company		-	
	3801 Holly	ywood Boulevard, Suite 20 Address	00	-	
	Holl	ywood, Florida 33021 City/State and Zip Code	<del></del>	2010 MAY -7 PM 12: 27 SECRETARY OF STATE TALLAHASSEE, FLORIO	and the second
	E-mail address: (to	be used for future annual report notifi	cation)	3338 1 7 8	17
For further information	concerning this matter, please ca	II:		M 12: 2	gando bil B <sub>egand</sub> o
	ny A. Cohen, Esq. of Person	at ( 954 ) Area Code & Daytime	923-3801 Telephone Numbe	<del></del>	
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	) Certifie	ate of Status &	ed)

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

Madinir	na Dry Cleaner LLC		
( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears of Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	5/18/2009	and assigned
Florida document numberL09000048131	<u></u> .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company here:		
The new name must be distinguishable and end with the we"L.L.C."	ords "Limited Liability Company,	" the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:	·		
(Principal office address MUST BE A STREET ADD	(RESS)		SECR M
		<u></u>	
Enter new mailing address, if applicable:		·	ARY ASSE
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·	PH P
			2: 28 0RID
B. If amending the registered agent and/or registered agent and/or the new registered office ad		records, <u>enter</u>	the name of the new
Name of New Registered Agent:			- Anna San Care Care Care Care Care Care Care Care
New Registered Office Address:		<u></u>	
	Enter	Florida street ad	ldress
	City	, Florida _	Zip Code
	<i>\(\frac{\cut_{n_j}}{\cut_{n_j}}\)</i>		2.p Conc

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

Title **Name Address Type of Action** 163 North Powerline Road MGR Steven Weinfield ✓ Add Deerfield Beach, Florida 33442 Remove □ Add Remove ☐ Add Remove Remove 200 D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated April 23 2010 Signature of a member or authorized representative of a member Stephan Torres
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00