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: THE FINKELSHTEYN GROUP, P.A.

Account Number : I20110000027

: (305)931-9212

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MAY 11 2011

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ANISO 9, LC 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:	
Alexander Podeshufy Name of Person	
AMISO 9 LLC Firm/Company	TALLAHASS
3957 NE 163 & Streed	
N, Miami Beach FZ 33/60 City/State and Zip Code	AND: 42
E-mail address: (to be used so future annual report notification)	
For further information concerning this matter, please call:	
Alexander Padoluff at (305) 354-4300 Name of Person Area Code & Daytime Telophone	Number
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy (additional copy is enclosed)	0.00 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

AMIS	09, LLC				
(Name of the Limiter	l Liability Company as it no A Florida Limited Liability C	w appears on our recompany)	rds,)		
The Articles of Organization for this Limited L. Florida document number 209.0000	iability Company were file	d on <u>07/13/</u>	<u> 2009</u> and as	ssigned	
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name o	f the limited liability com	pany here;			
The new name must be distinguishable and end wi	th the words "Limited Liabili	ty Company," the design	nation "LLC" or the	abbrevi	ation
"L.L.C."			Ħ.	23	
Enter new principal offices address, if applic	nble:			<u>=</u>	
(Principal office address MUST BE A STREET ADDRESS)				=	
			S 3		
			Fig	7	[7
Enter new mailing address, if applicable:			FIG	<u> </u>	
(Mailing address MAY BE A POST OFFICE	BOX)		<u> </u>		
	··-··		<u> </u>		
B. If amending the registered agent and/ registered agent and/or the new registered of	lice address here:			of the	<u>new</u>
Name of New Registered Agent:	Alexander	r Pedoln	YY		
New Registered Office Address:	3957 NE	163 Pd S Enter Florida str	TOST reet address	 	_
	Alexander 3957 NE N. Miami I	Baach, Flor	ida <u>33/lot</u> Zip Cod	<u>)</u>	
New Registered Agent's Signature, if changing I					

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, thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

MGR = Manager

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:

MGRM = Managing Member Type of Action Address **Title** Name ☐ Add Remove . ☐ Add Remove Remove ∐Add _Ad**⇔** D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00