

LO9 000082126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

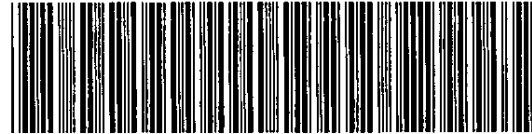
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

OCT 22 2013

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 24, 2013

SILVIO SPALLONE  
16 COURT STREET, SUITE 2000  
BROOKLYN, NY 11241

SUBJECT: 270 E. ATLANTIC AVE DELRAY BEACH, LLC  
Ref. Number: L09000082126

We have received your document for 270 E. ATLANTIC AVE DELRAY BEACH, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline  
Regulatory Specialist II

Letter Number: 313A00022447

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DIVISION OF STATE  
CORPORATIONS

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 270 EAST Atlantic Ave Delray Beach, 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:

Silvio Spallone  
Name of Person

270 EAST Atlantic Ave Delray Beach, LLC  
Firm/Company

16 Court Street, Suite 2000  
Address

Brooklyn New York 11241  
City/State and Zip Code

CPP DEV/LLC @ Yahoo. com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Silvio Spallone at (917) 335-2096  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |   |
|--|--|--|---|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee &<br>Certificate of Status &<br>Certified Copy<br>(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

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

270 EAST ATLANTIC AVENUE DELRAY BEACH, 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 August 25<sup>th</sup>, 2009 and assigned  
Florida document number LD9000082126.

This amendment is submitted to amend the following:

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

NA

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)**

16 COURT STREET  
Suite 2000  
BROOKLYN NY 11241

**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:

CARY KREVOY

New Registered Office Address:

3413 NORFOLK STREET

Enter Florida street address

Pompano Beach  
City

Florida  
Florida

33062  
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	ERDEM ZEYNEL	32 S.E. 2 <sup>ND</sup> AVE # 326 DeLray Beach, Florida 33444	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Silvio Spallone	16 Court Street Suite 2000 Brooklyn NY 11247	<input checked="" 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
			<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.)

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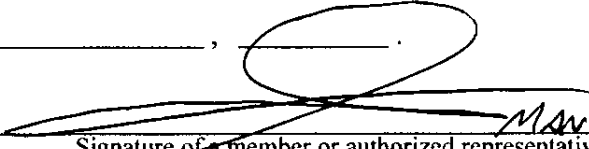
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Dated 9-17-13

  
Signature of a member or authorized representative of a member

Silvio Spallone

Typed or printed name of signee

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