

209000083517

(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:

J. HORNE
DEC - 1 2021

10/28

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600372024256

FILED

2021 OCT 29 AM 12:01

SECRETARY OF STATE
TALLAHASSEE, FL 32301



2021 OCT 28 AM 10:36

FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 16, 2021

NISSIM OZERY
735 VALLANCE WAY NE
SAINT PETERSBURG, FL 33716 US

SUBJECT: KORENFINE & OZERY, LLC
Ref. Number: L09000083517

We have received your document . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 621A00022453

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Korenfine and Ozery LLC
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Nissim Ozery
Contact Person

Korenfine and Ozery LLC
Firm/Company

735 Vallance Way NE
Address

Saint Petersburg, FL 33716
City, State and Zip Code

nissimjose@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nissim Ozery at (954) 899 4091
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|---|
| <input checked="" type="checkbox"/> \$52.50 Filing Fee | <input type="checkbox"/> \$61.25 Filing Fee
and Certificate of
Status | <input type="checkbox"/> \$105.00 Filing Fee
and Certified Copy | <input type="checkbox"/> \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status |
|--|---|--|---|

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2021 OCT 29 AM 12:01

Korenfine and Ozery LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 10/22/2021 and assigned
Florida document number 209000083517.

This amendment is submitted to amend the following:

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

No change
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: No change
(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable: No changes
(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: No change

New Registered Office Address: No Change
Enter Florida street address

_____, Florida _____
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

[illegible]

[illegible]

(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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 10/22/2021, _____

Signature of a member or authorized representative of a member

ITZHAK KORENFINE

Typed or printed name of signee

Filing Fee: \$25.00