10900092438

(Requi	estor's Name)	
(Addre		
, (Addie	:55)	
- (Addre	ss)	
(City/S	tate/Zip/Phone	-
(City/S	tate/Zip/Priorie	: #)
PICK-UP	WAIT	MAIL
(Busin	ess Entity Nan	ne) .
. (Docur	nent Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	
		ŀ
· 		

Office Use Only



900163111789

12/04/09--01027--009 **115.00

2000 DEC -4 AM ED: 28
SECRETARY OF STATE
TAIL ANASSEE. FLORID

T. CLINE

DEC - 7 2009

EXAMINER



Sent Via Fedex

December 3, 2009

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: FL CITY HOLDINGS, LLC

To Whom It May Concern:

Enclosed please find this firm's trust account check in the amount of \$115.00 together with the Resignation of Registered Agent for a Limited Liability Company and Articles of Amendment to Articles of Organization for the above referenced limited liability company.

Please send the certificate of Status to the attention of Mitchell C. Fogel, Esq. at the address below.

Should you require anything further, please feel free to contact me.

Very truly yours.

Legal Assistant for the Firm

Enclosures

· COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	CT:	FL CITY	HOLDINGS, LLC	
	o., <u></u>		ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please re	eturn all correspo	ndence concerning this matte	r to the following:	
			Mitchell C. Fogel, Esq.	
			Name of Person	
			Fogel Law Group	
			Firm/Company	<u> </u>
		2500 1	North Military Trail, Ste. 200	2009 DEC -4 SECRETARY TALLAHASS
		F	Boca Raton, FL 33431	TARY
•			City/State and Zip Code	For six
		mf	ogel@fpfloridalaw.com (to be used for future annual report notification)	
For furth	er information co	E-mail address: (oncerning this matter, please of		<u>D</u> r. 26
	Mitc	hell C. Fogel	at (561) 393-9111	
	Name of	Person	Area Code & Daytime Telephone N	
Enclosed	l is a check for th	e following amount:		
\$25.0	00 Filing Fee	330.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) Certified Copy	00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed)
	Registra Division P.O. Bo	NG ADDRESS: ation Section of Corporations x 6327 see, FL 32314	STREET/COURIER ADDRE Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	ss:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FL_	CITY HOL	DINGS, LLC			
(Name of the Limited L (A F	i <mark>ability Comp</mark> ai Iorida Limited L	ny as it now appears on ociability Company)	ur records.)		
The Articles of Organization for this Limited Liab Florida document number	•	were filed on Sep	t. 24, 2009	and assig	ned
This amendment is submitted to amend the follow	ing:				
A. If amending name, enter the new name of the	<u>1e limited liab</u>	ility company here:			
The new name must be distinguishable and end with t "L.L.C."	he words "Limi	ted Liability Company," th	e designation "l		previation
Enter new principal offices address, if applicab	le:	c/o Ortiz & Associa	ates		5 }
(Principal office address MUST BE A STREET	ADDRESS)	6262 Bird Road, S	uite 2H	SSR L	\$1.44 to 7 ph
		Miami, FL 33155		E ST D	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		c/o Ortiz & Associa 6262 Bird Road, S		* 2 0 2	
		Miami, FL 33155			
B. If amending the registered agent and/or registered agent and/or the new registered office. Name of New Registered Agent:		e:	cords, <u>enter 1</u>	the name of	the new
New Registered Office Address:	2500 N. Military Trail, Suite 200 Enter Florida street address				
	ה				
	В	oca Raton City	, Florida	33431 Zip Code	
New Desistand Agent's Signature if shanging Des	ristanad Agent.	•			

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Aldo Marchena	9843 Three Lakes Circle, Suite 12H Boca Raton, FL 33428	Add _✓ Remove _
<u>MGR</u>	Henry Ferszt	El Gabino 13118 Depto 503 A Lo Barnechea, Santiago, Chile	Add Remove
MGR_	Erwin Fried	7316 San Sebastian Drive Boca Raton, FL 33433	_
			Add Remove
		AH HAS	
		יייי ייייי איניייי אינייייי אינייייייייי	Remove
D. If amen	ding any other information, en	iter change(s) here: (Attach additional sheets, if necessary.)	Remove
_			-
_			
Dated	December 3	_,2009	
	Signature	f a member or authorized representative of a member	
	Signature o	Mitchell C. Fogel	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00