09000104577

(Requestor's Name)						
(Address)						
(Address)						
(Cit	y/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
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10/29/10--01011--013 **25.00

T. HAMPTON

MAY - 8 2010

EXAMINER

COVER LETTER

Division of Co	rporations					
SUBJECT:	Sunny prope	rties of south FL IIc				
	Name of Limit	ted Liability Company				
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
		Moshe Shabat				
		Name of Person				
	Sunny	properties of south FL IIc				
		Firm/Company				
	170	70 collins Ave suite 256				
	•	Address				
	ç	Sunny isles FL 33160				
	City/State and Zip Code					
	mshat	oat@sunnypropertyfl.com	N - 1 - 1			
			rication)			
For further information	concerning this matter, please of	all:				
M	loshe Shabat	at (305)	9483062			
Name	of Person	Area Code & Daytin	ne Telephone Number			
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 enclose	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
			•			

MAILING ADDRESS:

TO:

Registration Section"

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

10 NOV -5 PM 4:00

. SECRETARY OF STATE TALLAHASSEE, FLORIDA

November 1, 2010

MOSHE SHABAT 17070 COLLINS AVE **STE 256** SUNNY ISLES, FL 33160

SUBJECT: SUNNY PROPERTIES OF SOUTH FLORIDA, LLC

Ref. Number: L09000104577

We have received your document for SUNNY PROPERTIES OF SOUTH FLORIDA, 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):

You must insert the letters " MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

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) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 210A00025686

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

10 NOV -5 PM 24 66

(Name of the Limiter			s on our records.)		
The Articles of Organization for this Limited L Florida document numberL0900010		were filed on	10/29/2009	and assigned	
This amendment is submitted to amend the fol	lowing:				
A. If amending name, <u>enter the new name (</u>	of the limited liab	oility company her	<u>e</u> :		
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Compa	ny," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:		Moshe Shabat			
(Principal office address MUST BE A STREET ADDRESS)		17070 Collins Ave Suite 256			
		Sunny isles F	L 33160	<u> </u>	
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	E BOX)				
B. If amending the registered agent and registered agent and/or the new registered of			our records, <u>enter t</u>	he name of the nev	
Name of New Registered Agent:	Moshe Sha	bat			
New Registered Office Address:	17070 Colli	ns Ave Suite 25	6		
		En	ter Florida street addi	ress	
		Sunny Isles	, Florida	33160	
		City		Zin 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 **Title Type of Action** <u>Name</u> **Address** NGRM Moshe Shabat 17070 Collins Ave Suite 256 ✓ Add Sunny isles FL 33160 Remove NGI INVESTMENT Inc 17070 Collins Ave Suite 256 ✓ Add Remove Sunny isles FL 33160 N.G.I Properties LLC 17070 Collins Ave Suite 256 Sunny isles FL 33160 √ Remove MGRN Aventura properties of s. fl. 17070 Collins Ave Suite 256 Sunny isles FL 33160 ilana bendean 17070 Collins Ave Suite 256 □Add Remove Sunny isles FL 33160 \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Moshe Shabat Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00