L09000108108

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SECRETARY OF STATE DIVISION OF CORPORATION

Land to the state of

T. HAMPTON

Heil - 4 2009

EXAMINER

COVER LETTER

TO: Registration Secti Division of Corpo				
SUBJECT: 1771 (NE 173 STREET, LLC			
	Name of Limited Liability Company			
The enclosed Articles of Ar	nendment and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
	DANIS ISHAKI BEHAR			
	Name of Person			
Firm/Company				
	18101 COLLINS AVENUE, SUITE 1609			
Address				
SUNNY TSLES BEACH, FL 33160 City/State and Zip Code				
City/State and Zip Code				
noa.ishaki@gmail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
DANIS ISHAKI BEHAR at 305 974-0178 Name of Person Area Code & Daytime Telephone Number				
Enclosed is a check for the f	following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & \$55.00 Filing Fee & \$\sum \text{V}\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) 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

1771 NE 173 STREE				
(Name of the Limited Liability Company (A Florida Limited Lia	y <mark>as it now appears on ou</mark> ability Company)	r records.)		
The Articles of Organization for this Limited Liability Company v Florida document number <u>L09000108108</u>	vere filed on 11/10	2009 and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability 15HAKY, LLC.	ity company here:			
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the	designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:		<u> </u>		
(Principal office address MUST BE A STREET ADDRESS)		SE S		
		是 经		
Enter new mailing address, if applicable:		-3 #		
(Mailing address MAY BE A POST OFFICE BOX)		OR.		
		50		
		N.S.		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our rec	ords, enter the name of the ne		
Name of New Registered Agent:				
New Registered Office Address:	/			
New Registered Office Address. Enter Florida street address				
		, Florida		
	City	Zip Code		
Name The electron of Americal City and the Market City and the State of the City and the City an		-		

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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manage or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Type of Action Address Title** <u>Name</u> ☐ Add Remove ☐ Add ☐ Remove ☐ Add ☐ Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009 Dated Signature of a member or authorized representative of a member BEHAR Typed or printed name of signee

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