

W9000120942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

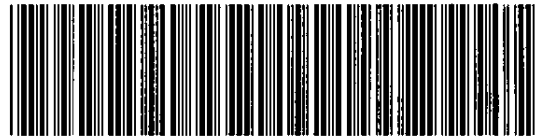
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/05/10--01009--007 **25.00

2010 FEB -5 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

FEB - 8 2010

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Stephen Matthew Elbaz 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:

Stephen Elbaz
Name of Person

Stephen Matthew Elbaz LLC
Firm/Company

717 NE 10th ave. West apt #2
Address

Hallandale Beach Florida, 33009
City/State and Zip Code

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

For further information concerning this matter, please call:

Stephen at (786) 333 8534
Name of Person Area Code & Daytime Telephone Number

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & 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

Stephen Matthew Elbaz 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 12-21-09 and assigned Florida document number LO9000120942

This amendment is submitted to amend the following:

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

Same Name

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)

717 NE 10th ave
apt # 2 (West apt)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

717 NE 10th ave
apt # 2 (West apt)

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:

Stephen Elbaz (the same name/person as before)

New Registered Office Address:

717 NE 10th ave apt # 2 (West apt)
Enter Florida street address

Hallandale Beach, Florida 33009
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 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.

[Signature]
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

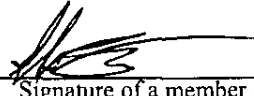
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Stephen Elbaz	224 SE 9th Ct apt 3 Hallandale Beach FL 33009	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Stephen Elbaz	717 NE 10th ave apt 2 (west apt) Hallandale Beach, FL, 33009	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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 TALLAHASSEE FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I'm just changing my business's address.

Dated 1-29-10


 Signature of a member or authorized representative of a member
Stephen Elbaz
 Typed or printed name of signee