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TALLAHASSEC, FLUMON

MAR 01 2016 S. YOUNG

COVER LETTER

TO: Registration Se Division of Cor			
Crest Lake	LLC		
SUBJECT:	Name of Lim	ited Liability Company	···
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
	endence concerning this matter		
	Avi Yogev		
		Name of Person	
	Crest lake LLC		
		Firm/Company	
	1641 Palmetto st		FEB AHA
		Address	
	Clearwater FL, 33755		AHASSELFLUME FEB 29 PH 5: 52
		City/State and Zip Code	्रा ट्
	crestlake@opiww.com		
	E-mail address: (to be used for future annual report notif	ication)
For further information c	oncerning this matter, please c	all:	
Avi Yogev		727 510 0382 at ()	
Name o	f Person		: Telephone Number
Enclosed is a check for the	ne 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)
Registi Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURI Registration Section Division of Corpor Clifton Building	n
	assee, FL 32314	2661 Executive Ce	nter Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Crest lake LLC		
(Name of the Limited Liability Co (A Florida Lim	mpany as it now appears on our reconited Liability Company)	15.)
The Articles of Organization for this Limited Liability Comp	nany were filed on 02/02/2010	and assigned
Florida document number L10000011852		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	16 ALL
	***************************************	FEB AND
		ASS ASS
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		9: 0RA
		2 UM
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		ls, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	2.55
		lorida
V	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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Ofir Yogev	1641 Palmetto st, Clearwater FL 33 755	
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tive date, if other than the date of filing:	(antional)	2
fective date, if other than the date of filing: fective date is listed, the date must be specific and cannot be prior to If the date inserted in this block does not meet the applical ment's effective date on the Department of State's records.	(optional) o date of filing or more than 90 days after filing.) Pursuant ble statutory filing requirements, this date will not b	to 60
ecord specifies a delayed effective date, but not e 90th day after the record is filed.	an effective time, at 12:01 a.m. on the e	:arli
i Feb, 24 , 2016		
,		
Signature of a member or author	ized representative of a member	 -

Page 3 of 3

Filing Fee: \$25.00