

L10000028665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700259789027

05/07/14--01009--007 **25.00

FILED
2014 JUN -2 AM 10:59
TALLAHASSEE FLORIDA

JUN 03 2014

3801

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NYFL Commercial Holdings 2, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthew Toll

Name of Person

Toll Law

Firm/Company

1217 Cape Coral Pkwy E. #121

Address

Cape Coral FL 33904

City/State and Zip Code

matt@matthewtoll.com

E-mail address: (to be used for future annual report notification)

CLERK OF COURT
TALLAHASSEE, FLORIDA

2014 JUN -2 AM 10:59

FILED

For further information concerning this matter, please call:

Matthew Toll

Name of Person

at (239) 257-1743

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

NYFL Commercial Holdings 2, 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 3/15/10 and assigned Florida document number L100 000 28665.

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 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Toll Law

1323 Lafayette Street, Ste. C

Enter Florida street address

Cape Coral

Florida

33904

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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
--------------	-------------	----------------	-----------------------

MGR	Constantin Venetis	10090 Intercom Drive Ste 3-13 Ft Myers FL 33913	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
-----	-----------------------	--	--

Managing Member (MGRM)	Anastatos Vasilakos	P.O. Box 280 290 Brooklyn, NY 11228	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
------------------------------	------------------------	--	--

☐ Add

☐ Remove

☐ Add

☐ Remove

☐ Add

☐ Remove

☐ Add

☐ Remove

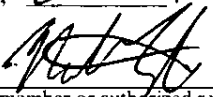
FILED
2014 JUN -2 AM 10:59
CLERK OF SUPERIOR COURT
JULIA A. HARRIS

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 30, 2014



Signature of a member or authorized representative of a member

Matthew Toll

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2014 JUN -2 AM 10:59
DEPT. OF STATE
TALLAHASSEE FLORIDA