L10000044460

(Re	equestor's Name)				
(Address)					
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PICK-UP	☐ WAIT	MAIL			
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Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				
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B. BOSTICK
NOV 3 0 2010
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporatio	ns		•	
eum ir	, y	RAFAFI	HOLDINGS LLC		
SUBJF	ECT:		ited Liability Company		
The en	closed Articles of Amendr	ment and fee(s) are sul	bmitted for filing.		
Please	rcturn all correspondence	concerning this matter	r to the following:		
			GOLAN FELDMAN		
			Name of Person	Broaddar III (and bernallis addit radi menere e i Provinceme	der vallenad •
		RA	FAEL HOLDINGS LLC		
			Firm/Company		
		1640	TOWN CENTER CIR #2	10	5
			Address	•	SEGR
			WESTON,FL 33326		NOV 29
	City/State and Zip Code				29 PHIZ
			NFELDMAN@GMAIL.CO to be used for future annual report r		ED PH 12: 06 OF STATE E. FLORID
For fur	ther information concernir		-	······,	2: 06 TATE ORIDA
	GOLAN FE	LDMAN	at (954)	3915663	
	Name of Person		Area Code & Day	ytime Telephone Nu	mber
Enclose	ed is a check for the follow	ving amount:			
√ \$25		0.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	Cert osed) Cert	O Filing Fee, ificate of Status & ified Copy itional 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

RAFAEL HOLDIN			
. (Name of the Limited Liability Company as (A Florida Limited Liabilit	it now appears on our records.) y Company)		
	• •		
The Articles of Organization for this Limited Liability Company were	filed on 04/26/2010 and assigned		
Florida document number <u>L10000044460</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability c	company here:		
The new name must be distinguishable and end with the words "Limited Lia" L.L.C."	ability Company," the designation "LLC" or the abbreviation		
	Ţ		
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)	LCC ALCO TO THE CONTRACT OF TH		
<u> </u>	NASS		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)	FEST STATE OF THE		
	0E 6		
3. If amending the registered agent and/or registered office a	ddress on our records, enter the name of the ne		
registered agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
TON REGISTION OTHER PROBLEM.	Enter Florida street address		
	Flori I-		
Cin	, Florida		

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 Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title <u>Name</u> **Address** Type of Action **MGRM** GOLAN FELDMAN 1640 TOWN CENTER CIR # 210 WESTON FL 33326 Remove ____ Add Remove Remove \square Add Remove \square Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ______11/17 2010 Signature of a member or authorized representative of a member RAHI ASHAMI Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00