

L10000054858

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

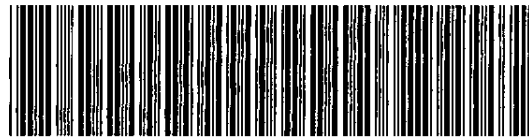
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR 18 PM 2 50

N. Culligan APR 19 2011

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: US IL 018 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:

ROY S SHRIKI
Name of Person

US IL PROPERTIES LLC
Firm/Company

4700 SW 51st Street Suite 205
Address

Davie FL 33314
City/State and Zip Code

ROY@USILPROPERTIES.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROY S SHRIKI at (954) 964-6461
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Page 1 of 2

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>
MGR	CHALOM C BITTON	4700 SW 51st Street Suite 205 DAVIE FL 33314	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	US IL PROPERTIES LLC	4700 SW 51st Street Suite 205 DAVIE FL 33314	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	IDO DRORY	4700 SW 51st Street Suite 205 DAVIE FL 33314	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated 04/14, 2011

Signature of a member or authorized representative of a member

ROY S SHRIKI

Typed or printed name of signee

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