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2011 SEP 27 AH ION 02 SEGRETARY OF STATE

T. CLINE
SEP 2 8 2011
EXAMINER

COVER LETTER

	tiòn Section of Corporations		
SUBJECT:	LEA & G	UY ZERACH, LLC	
	Name of Li	mited Liability Company	-
The enclosed Arti	cles of Amendment and fee(s) are s	submitted for filing.	
Please return all c	orrespondence concerning this mate	ter to the following:	
		Ronen Dagan	
		Name of Person	
		Lea & Guy Zerach, LLC	_
		Firm/Company	
	2	20815 NE 16 Ave., #B-7	
	1.00	Address	-
	No	o. Miami Beach, FL 33179	ASS ASS
		City/State and Zip Code	MI SEP 27 SECRETARY
			ASS
For further inform	t:-mail address:	(to be used for future annual report notification)	
	Ronen Dagan	at (305) 655-1045	STATE STATE
	Name of Person	Area Code & Daytime Telephone Numb	To
Enclosed is a chec	k for the following amount:		
☑ \$25.00 Filing F	ee ☐\$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certific	iling Fee, cate of Status & ed Copy onal copy is enclosed)
]]]	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, 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

	Lea & Guy	Zerach, LLC			
(<u>N</u>	lame of the Limited Liability Com (A Florida Limite	pany as it now appear d Liability Company)	s on our records.)		
The Articles of Organization	for this Limited Liability Compa	ny were filed on	6/22/10	and assi	gned
Florida document number _					
This amendment is submitte	d to amend the following:				
A. If amending name, ente	er the new name of the limited li	ability company hero	<u>e</u> :		
The new name must be disting "L.L.C."	uishable and end with the words "L	imited Liability Compa	ny," the designation	"LLC" or the ab	breviation
Enter new principal offices	address, if applicable:			II SEP	r- Tre
(Principal office address M	UST BE A STREET ADDRESS)			27 A.S. 155	ATTENDA
					TT;
Enter new mailing address.	, if applicable:			STATE FLORIDA	Second Control
(Mailing address MAY BE A	4 POST OFFICE BOX)			> 03	
B. If amending the regis	tered agent and/or registered new registered office address h	office address on o	ur records, <u>enter</u>	the name of	the new
egistered agent and/or the	new registered office address in	<u>ere</u> .			
Name of New Regi	stered Agent:				
New Registered Of	fice Address:				
		Ente	er Florida street ad	ldress	
	-		, Florida		
		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.

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 = N	Managing Member	•	
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Guy Zerach	20815 NE 16 Ave., #B-7 No. Miami Beach, FL 33179	Add Remove
			Add Remove
			Add Remove
		· · · · · · · · · · · · · · · · · · ·	And And Remove
			ARY Add Premove
D. If amend	ling any other information, e	enter change(s) here: (Attach additional sheets, if necessa	Remove
_			
_			
 Dated	September 22,	2011	
	Signation	My	
	Signature	of a member or authorized representative of a member	
		Ronen Dagan Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00