~ [10000017387

| (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:

L. SELLERS

DEC -9 2010

EXAMINER

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COVER LETTER

| TO: Registration S Division of Co | Section orporations | | • | | |
|--------------------------------------------------------------------------------------------|--------------------------------------------|------------------------------------------------------------|------------------------------------------------------------------------------------------|--|--|
| SUBJECT: | US | IL 027 LLC | | | |
| | Name of Lim | ited Liability Company | | | |
| The enclosed Articles o | f Amendment and fee(s) are sul | bmitted for filing. | | | |
| Please return all corresp | ondence concerning this matter | r to the following: | | | |
| | | ROY S SHRIKI | | | |
| | | Name of Person | | | |
| US IL 027 LLC | | | | | |
| Firm/Company | | | | | |
| 4841 PEMBROKE RD | | | | | |
| | | | | | |
| HOLLYWOOD FL 33021 | | | | | |
| | · | | | | |
| ROY@USILPROPERTIES.COM E-mail address: (to be used for future annual report notification) | | | | | |
| | | | ort notification) | | |
| For further information | concerning this matter, please of | call: | | | |
| R | OY S SHRIKI | at (954) | 964-6461 | | |
| Name | of Person | | Daytime Telephone Number | | |
| Enclosed is a check for | the following amount: | | | | |
| ₹ \$25.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is en | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | | |
| | LING ADDRESS: | STREET/C | COURIER ADDRESS: | | |

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

ASTON COLUMN

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | US IL 027 LLC | | | |
|--------------------------------------------------------------|---------------------------------------------------------------------|------------------------------|--------------|-------------|
| (<u>Name of the Limited Li</u> (A F | ability Company as it now appea orida Limited Liability Company) | rs on our records.) | | |
| The Articles of Organization for this Limited Liab | 07/22/2010 | and assi | igned | |
| Florida document numberL1000007738 | | | | |
| This amendment is submitted to amend the follow | ing: | | | |
| A. If amending name, enter the new name of th | e limited liability company he | <u>re</u> : | | |
| The new name must be distinguishable and end with t "L.L.C." | he words "Limited Liability Comp | any," the designation "L | LC" or the a | bbreviation |
| Enter new principal offices address, if applicab | le: | | | |
| (Principal office address MUST BE A STREET A | ADDRESS) | | | |
| | | | | |
| Enter new mailing address, if applicable: | | | | |
| (Mailing address MAY BE A POST OFFICE BO | <u></u> | | | |
| | | | | |
| B. If amending the registered agent and/or | | our records, <u>enter t</u> | he name o | f the new |
| registered agent and/or the new registered offic | e address here: | | | |
| Name of New Registered Agent: | | Ī | SE 10 | |
| New Registered Office Address: | | , | OEC CREY | 100 |
| • | Er | nter Florida street add i | ress 1 | Stransmine. |
| | City | , Florida 💐 | Sin Code | FTI - |
| New Registered Agent's Signature, if changing Reg | • | -021 | Zip Gode | الانتانا |

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 Address** Type of Action Name MGRM URI GAMLIEL 4841 PEMBROKE RD **✓** Add HOLLYWOOD FL 33021 Remove Add ☐ Remove ☐ Remove Remove □Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 12/2 2010 Signature of a member or authorized representative of a member ROY S SHRIKI Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00