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COVER LETTER

TO:	Registration S Division of Co				
SUBJE	ERLICH INVESTMENTS OF SOUTH FL, LLC				
00202		Name of Lim	ited Liability Company		
The enc	losed Articles o	of Amendment and fee(s) are sul	bmitted for filing.		
Please re	eturn all corres _i	pondence concerning this matter	r to the following:		
			EYAL HALALI		
			Name of Person		
			Firm/Company		
		PO BOX 4174			
Address					
FORT LAI		UDERDALE, FLORIC	DA 33338		
		EU	City/State and Zip Code	NA	
		E-mail address: (HALALI@GMAIL.CO to be used for future annual rep	port notification)	
For furt	ner information	concerning this matter, please of	call:		
***	E	YAL HALALI	at (_954_)	638-7034	
	Name	of Person	Area Code &	z Daytime Telephone Number	
Enclose	d is a check for	the following amount:			
\$25. 0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Regis Divis P.O. I	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, FL 32314	Registratio Division of Clifton Bui	Corporations	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ERLICH INVESTMENTS OF SOUTH FL, 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 C	Company were filed on _	AUGUST 27,2010	_ and assigned	
Florida document number L10000090158	<u>_</u> .			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	ited liability company i	here:		
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Cor	npany," the designation "LLC	" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDI	RESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		n our records, enter the		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, 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 = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action		
MGRM	JOSEPH ERLICH	1708 NE 20TH AVE, STE 5 FORT LAUDERDALE EL 33305	✓ Add Remove		
		*	Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
D. If amend	ing any other information, e	enter change(s) here: (Attach additional sheets, if necessa	ry.)		
	FEBRUARY 2				
Dated	TEBROART 2				
	Signature of a member or authorized representative of a member				
		EYAL E HALALI Typed or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00