

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H10000218891 3)))



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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
S & E CASTLE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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10 OCT -5 PM 1:44
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G. MCLEOD

OCT - 6 2010

EXAMINER

4

H10000218891

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S & F Castle, LLC
Name of Limited Liability Company

L1000001445

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joel F. Greenberg
Name of Person

Greenberg, Baisden & Perez, LLC
Firm/Company

4300 N University Dr, Suite D 106
Address

Lauderhill, FL 33351
City/State and Zip Code

emily@kenigero.com
Email Address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sue Greenberg at (954) 749-0500
Name of Person Area Code & 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 enclosed) ☐ \$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

H10000218891

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

S. F. Castle 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 Company were filed on 9/28/2010 and assigned
Florida document number L10000101445.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation
"L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

60 W Tropical Way
Plantation FL 33317

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

60 W Tropical Way
Plantation FL 33317

B. If amending the registered agent and/or registered office address on our records, enter the name of the new
registered agent and/or the new registered office address here:

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

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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:

MGRM - Manager

MGRM - Managing Member

Title	Name	Address	Type of Action
MGRM	Emily T. Mountcastle	60 Tropical Way Plantation # 93317	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Emily T. Mountcastle	60 W Tropical Way Plantation # 93317	<input checked="" type="checkbox"/> Add <input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated

10/4/10

Emily T. Mountcastle

Signature of a member or authorized representative of a member

EMILY T. MOUNTCASTLE

Typed or printed name of signer

Page 2 of 2

Filing Fee: \$25.00

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