L10000118452

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3 MAY -9 FM 12: 46
SECRETARY OF STATE
ALLAHASSEE FLORIDA

C. LEWIS

MAY 1 0 2013

EXAMINER



COVER LETTER

TO: *Registration So Division of Co	ection rporations 🤻 🤏 😘	· · · · · · · · · · · · · · · · · · ·	. 5 79
Double SUBJECT:	18 Tov LLC		
SUBJECT.	Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Yosef Y Kanner		
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
		Firm/Company	
	3121 W Hallandale E	Beach Blvd., Suite 102	
		Address	-
	Hallandale FL 33009		
	y@floridastatetrust.co	City/State and Zip Code	
	E-mail address: (to	be used for future annual report notificat	ion)
For further information of	concerning this matter, please ca	all:	
Yosef Y Kanner		717 467-1680	
Name o	of Person	at () Area Code & Daytime Te	elephone Number
Enclosed is a check for t	he 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

13 MAY -9 PM 12: 46

Double 18 Tov 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 Li	ability Company	were filed on	010 and assigned
Florida document numberL10000118452	·		
This amendment is submitted to amend the folk	owing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ted Liability Company," t	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		3121 W Hallandale Beach Blvd.,	
		Suite 102	
		Hallandale FL 33	009
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/oregistered agent and/or the new registered of	or registered of		ecords, enter the name of the new
Name of New Registered Agent:	Yosef Y Kar	nner	
New Registered Office Address:	3121 W Hal	llandale Beach Blvd	., Suite 102
New Registered Office Address.		Enter Fl	orida street address
	Hallandale		. 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 = Ma MGRM = I	nnager Managing Member	FILED
<u>Title</u> MGR	<u>Name</u> Florida State Trust	Address SECRETARY OF STATE PO Box 820 TALLAHASSEE, FLORIDA Add
		Hallandale FL 33008
MGR.	DYC Group	P.O. Box 820
		Hallandale FL 33008
		Add
		Remove
		Add
		Remove
	·	Add
		Remove
		Add
		Remove

	information, enter change(s) here: (Attach additional sheets, if necessary.)
	12 ···
	FILED 13 MAY -9 CM 12 SECRETARY OF STAIL TALLAHASSEE, FLORE
May 2nd	2013
	Signature of a member or authorized representative of a member
	Yosef Y Kanner Typed or printed name of signee

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Filing Fee: \$25.00