10000128497

(Requestor's Name)		
(Address)		
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
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J. SAULSBERRY EXAMINER

JUL -3 2013

COVER LETTER

TO: Registration Section
Division of Corporations

1451 TAMIAMI TRL LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

ILYA LEVITIS

Name of Person

1451 TAMIAMI TRL LLC

Firm/Company

3201 NE 183rd St., Suite 2607

Address

AVENTURA, FL 33160

City/State and Zip Code

ilevitis@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ILYA LEVITIS

_at (305)766-9161

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1451	TAMIAMI	TRL	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 Liabi	lity Company were filed on	12/16/2010	and assigned
	my company more med on .		
Florida document number L10000128497	.		
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of th	e limited liability company	here:	
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Co	ompany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable	e:	- W	· <u></u>
(Principal office address MUST BE A STREET A	ADDRESS)		
			<u> </u>
		- -	
Enter new mailing address, if applicable:		· .	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Mailing address MAY BE A POST OFFICE BO	(X)		
	***************************************		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office		on our records, enter t	-''' C
Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florida street addi	ress
		, Florida	
•	City		Zip Code
New Registered Agent's Signature, if changing Reg	istered 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	LMB FLORIDA INVESTMENT CORPORATION	Megan Hewes c/o American Incorporators	Add
	•	1220 N. Market Street, Suite 808	Remove
		Wilmington, DE 19801	_
		- 	Add
			_ Remove
			_
			Add
			Remove
		E Company	Add-
		RESTURNA SECTOME	Remove
		Ţ u	Add
			Remove
			Add
			Remove

D. If amending any other information, e	nter change(s) here: (Attach additional sheets, if necessary.)
•	
-	
Dated June 27	2013
lle	Levitis trustee
_	of a member or authorized representative of a member
ILYA LEVITIS, TRU	STEE
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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