110000129950

(Re	questor's Name)	<u> </u>
——————————————————————————————————————	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		·

Office Use Only



900292959629

900292959629 12/08/16--01016--023 **75.00

2016 DEC - 3 PM 5: 33

K. SALY DEC - 9 2016

COVER LETTER

TO:	Registration Se Division of Cor		• .	V.
SUBJE		INVESTMENTS LLC	•	
SUBJE		Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		DEE CHOPYAK		
			Name of Person	
		MICHAEL E. LEACH, PA	1	
			Firm/Company	
		2400 E. COMMERCIAL E	BLVD, SUITE 706	
			Address	
		FORT LAUDERDALE, FI	L 33308	
		-		
		E-mail address: (to be used for future annual report notifi	ication)
For fur	ther information c	oncerning this matter, please ca	all:	
DORO	N BROMAN		305 308-0132	
	Name o	f Person	·	Telephone Number
Enclose	ed is a check for th	ne following amount:	, τ	
•	5.00 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

BROMAN INVESTMENTS LLC

A DOLOT EC	OF ODG ANIZATION	la.
, and the second se	OF ORGANIZATION	FILE
	OF	2015
BROMAN INVESTMENTS LLC		2016 DEC-P PM 5: 34
(Name of the Limited Liability)	Company as it now appears on our re	ecorde Chris
(A Florida Li	imited Liability Company)	2016 DEC - PM 5: 34 ecords) LAHASSEE, FLORING and assigned
The Articles of Organization for this Limited Liability Con	mpany were filed on 12/21/2010	and assigned
Florida document number 110000129950		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d 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 ADDRE.	<u>(SS)</u>	
	<u> </u>	-
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	v	
		
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		ords, enter the name of the nev
registered agent and/or the new registered office address	ss nere.	
Name of New Begintered Agents		
Name of New Registered Agent:		
New Registered Office Address:	F Fl. · l	11
	Enter Florida street a	aaress
	<i>(</i> 2)	, Florida
	Citv	zip Coae

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	DORON BROMAN	3330 NE 190 STREET, #2614	■ Add
		AVENTURA, FL 33180	□ Remove
			□ Change
AMBR	NATALY BROMAN	3330 NE 190 STREET, #2614	■ Add
		AVENTURA, FL 33180	_□ Remove
			☐ Change
	. —————————————————————————————————————		SEUNE REMOVE
			Change
			FLOOPAdd 5. 34
			□ Remove
			□ Change
			Add
			Remove
			Change
			
			□ Remove
			☐ Change

	1 1	٠.												
-												,		
_														
•														
													<i>~</i> ,.	
•		-											60	· g
_														
													FU	MINDER S PROPERTY
-										<u>.</u>				36 2
														140 C
-							-	•						053
														٠٠,
•														
									···					
														
•		•				•				·				
-								•••						
•								<u> </u>						
ect	ive date,	if other	than the	date of	filing:			1	•••	.1	(op	tional)	(05.000
														nt to 605,0207 t be listed as
	nent's effe								•					
re	cord spe	cifies	delave	d effect	ive da	ite. bu	ıt not	an effe	ective 1	time. a	t 12:0:	1 a.m.	on the	e earlier of
	90th da					, 50			· • • ·					· - · - ·
ted	Dag	_	}		•	20	16							•
icu					······································		-	- •						
					سمر		>							
				Signature	- Of m	embero	rauthor	zed repre	esentative	of a me	mher			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00