# L11000015168

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## COVER LETTER

TO: Registration Ser Division of Corp		,	
SUBJECT: Sa	omon - Goldste Name of Limi	ein Properties, Lited Liability Company	LC
. The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	Gerry (	Goldstein Name of Person	
	Saloman	- Goldstein Proper Firm/Company	Ales, LLC
	1346 Q	uiet Cove Cour Address	+
	<u>Gulf R</u>	Screeze FL 32 City/State and Zip Code	S63
	gerrygold 1 E-mail address: (1	23@ 9mail. Como o be used for future annual report notif	ication)
For further information co	oncerning this matter, please ca		
Gerry (	Soldstein Person	at (850) 50 1 at Area Code Daytime	Telephone Number
Enclosed is a check for th	e 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

Salomon. Go	ldstein Properties	LLC
(Name of the Limited Liab (A Flor	ility Company as it now appears on our r ida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Florida document numberL10000[5168	Company were filed onO2/c	94/2011 and assigned
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 contain 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)		
The new name must be distinguishable and contain the words "L	imited 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 ADI	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or reg	gistered office address on our rec	cords, enter the name of the new
registered agent and/or the new registered office ad	<u>Idress here</u> :	E. E. LOR. 33
Name of New Registered Agent:		ABE W
New Registered Office Address:		
	Enter Florida street d	address
	City	_, Florida Zip Code
	Cuy	Lip Cone

#### 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, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGMR	Gerry Goldstein	1346 Quiet Core Ct	
		1346 Quiet Core Ct GulfBreeze, FL 32563	□ Remove
			Change
MGMR	Mitzi Goldstein	1346 Quiet Cove Ct	🗆 Add
		Gulf Breeze, FL 32563	Remove
			Change
MGMR	Ferdinand L Salomon	3201 St. Andrews Drive	
		Pace, FL 32571	Remove
			Ehange :
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Typed or printed name of signee

Filing Fee: \$25.00