## LII000039110

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	<del>?</del> #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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## COVER LETTER

10.	Division of Corp				
SUBJE	TT:	ZSG F	Florida 2 LLC		
30000		Name of Limi	ted Liability Company		
The end	closed Articles of a	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:		
		Gabi Shabtai Name of Person			
			Firm/Company	•	
		1616 Coney Island Avenue Address			
		Brooklyn NY 11230			
	,	n	City/State and Zip Code nelgasales@aol.com to be used for future annual repor		
For fur	ther information c	E-mail address: () oncerning this matter, please o		t notification)	
	Ga	abi Shabtai	at (_917 )	681-9042 Paytime Telephone Number	
	Name of	Person	Area Code & D	laytime Telephone Number	
Enclose	ed is a check for th	e following amount:			
<b> ▼</b> \$25	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc	Certificate of Status & Certified Copy (additional copy is enclosed)	
(	/ Registra Divisio P.O. Bo	and Address: ation Section in of Corporations ox 6327 ssec. FL 32314	Registration S Division of C Clifton Build	orporations ing ve Center Circle	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

## 11 JUN 20 PM 3: 13

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	SG Florida 2 LLC		····
(Name of the Limited Liab (A Flor	ility Company as it now appears of ida Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liabili Florida document numberL11000039110		4/1/2011	and assigned
This amendment is submitted to amend the following	តិ:		
A. If amending name, enter the new name of the	limited liability company here:		•
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,	" the designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	ODRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	2		
B. If amending the registered agent and/or re registered agent and/or the new registered office a		records, enter the	namé of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
	Ciţv	Ž	ip 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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Moshe Vaknin	1868 E. 23rd Street Brooklyn, NY 11229	Z Add Remove
			Add Remove
***************************************			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter change	(s) here: (Attach additional sheets, if necessary)	
Dated	14/2011	1	SECRETARY OF STATE DIVISION OF CORPORATIONS 11 JUN 20 PH 3: 13
(X)	( <i>1</i>	or authorized representative of a member	SNO SNO

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Typed or printed name of signee

Filing Fee: \$25.00