

L11 000044285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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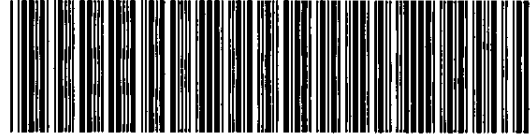
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TALLAHASSEE, FLORIDA

DEC 16 2014

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December 3, 2014

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: **LESAGA, LLC. ("Company")**
Document No.: L11000044285

Dear Sir/Madam:

Enclosed please find the following regarding the above referenced Company:

1. Cover Letter; and
2. Articles of Amendment to Articles of Organization ("Articles").

Please file the Articles with your office. After filing the Articles, please provide my office with a certified copy. We have enclosed our firm check in the amount of \$60.00 to cover the fees associated with the filing and requested certified copy. Additionally, enclosed please find a return self addressed stamped envelope for your convenience.

I thank you in advance for your attention and cooperation. Should you have any questions or need any additional information, please do not hesitate to contact me.

Very truly yours,

SNYDER & SNYDER, P.A.


Anne J. McPhee

AJM:ii
Encls.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LESAGA 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:

ANNE J. MCPHEE

Name of Person

SNYDER & SNYDER, P.A.

Firm/Company

7931 S.W. 45TH STREET

Address

DAVIE, FLORIDA 33328

City/State and Zip Code

ANNE@SNYDERLAWPA.COM

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

For further information concerning this matter, please call:

ILIANA IRIZARRY

954

475-1139

at (_____) _____

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**

LESAGA 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 Liability Company were filed on April 13, 2011 and assigned
Florida document number L11000044285

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 end with 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)

Gottesman Bosmer & Co. P.A.
8211 W Broward Blvd., Ste. 440
Plantation, Florida 33324

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

Gottesman Bosmer & Co. P.A.
8211 W. Broward Blvd., Ste. 440
Plantation, Florida 33324

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Todd W. Kliston, Esq.

New Registered Office Address:

861 E. Coco Plum Circle

Enter Florida street address

Plantation

City

, Florida 33324

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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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	FRANZBLAU, MARK	8211 W. BROWARD BLVD, STE 440	<input checked="" type="checkbox"/> Add
		PLANTATION, FLORIDA 33324	<input type="checkbox"/> Remove
MGR	HABER, BRETT	1111 PARK AVENUE, APT. 6B	<input checked="" type="checkbox"/> Add
		NEW YORK, NEW YORK 10128	<input type="checkbox"/> Remove
MGR	FRANZBLAU, LEONARD	4900 N. OCEAN BLVD, APT. 1213	<input type="checkbox"/> Add
		FT. LAUDERDALE, FLORIDA 33308	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

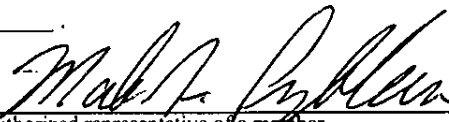
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated December 1, 2014



Signature of a member or authorized representative of a member

MARK Franzblau

Typed or printed name of signee

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Filing Fee: \$25.00

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