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EXAMINER



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SLORGTARY OF STATE
ALLAHASSEE, FI BRIB.

DAVID J. SCHOTTENFELD, P.A.

Attorney at Law

7520 Northwest 5th Street Suite 203 Plantation, Florida 33317

Telephone (954) 316-5033 Fax (954) 316-5037

July 16, 2012

Florida Department of State Division of Corporations Registrations Section P.O. Box 6327 Tallahassee, FL 32314

Re: BEVERLY HOLDINGS, LLC

Gentlemen:

Please find enclosed herein the following documents with respect to the above referenced matter:

- 1. Articles of Amendment to Articles of Organization
- 2. Resignation of Manager & Member Theodore Beverly
- 3. Resignation of Registered Agent Theodore Beverly
- 4. Check in the amount of \$75.00 representing the total filing fee for these three documents

Copies of the above listed documents have also been enclosed herein. Kindly acknowledge your receipt of same and forward the acknowledged copies to the undersigned in the envelope provided for your convenience.

Thank you in advance for your courtesy and prompt cooperation in this matter.

Very truly yours

SCHOTTENFELD

DJS/mib

DAVID .

Encl.

COVER LETTER

TO: Registration Division of C							
SUBJECT:							
		HOLDINGS, LLC ited Liability Company					
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.					
Please return all corres	pondence concerning this matte	r to the following:					
	Name of Person						
Beverly Holdings LLC							
		Firm/Company					
	42	11 NW 41 Street # 409					
	Address						
	Ft Lauderdale, FL 33319						
	City/State and Zip Code						
E-mail address: (to be used for future annual report notification)							
For further information	concerning this matter, please	call:					
Jac	quelyn M. Leslie	at (954) 24	10-2434				
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

(<u>Name of the Limited</u> (A	Liability Compa Florida Limited	ny as it now appears (on our records.)			
The Articles of Organization for this Limited L Florida document number			and ass	igned		
This amendment is submitted to amend the foll	owing:					
A. If amending name, enter the new name o	f the limited liab	oility company here:				
The new name must be distinguishable and end wi "L.L.C."	th the words "Lim	ited Liability Company	," the designation "L	LC" or the a	ıbbrevi	ation
Enter new principal offices address, if applic	able:	4211 NW 41 St	reet # 409	£	73	
(Principal office address MUST BE A STREE		Ft Lauderdale,	FL 33319	CAL A	JU	
Enter new mailing address, if applicable:		4211 NW 41 St	reet # 409	TARY OF S IASSEE, FI	9 AMI	yang.
(Mailing address MAY BE A POST OFFICE BOX)		Ft Lauderdale,	FL 33319	.T∧ï ØR	း. ယ	Tippu
				P	~	
B. If amending the registered agent and/registered agent and/or the new registered of Name of New Registered Agent:		<u>e</u> :	r records, <u>enter t</u> l	ie name o	f the	<u>new</u>
New Registered Office Address:	4044 5 11 44 60 1 1 44 400					
New Registered Office Address.	Enter Florida street address					
	Ft	Lauderdale	, Florida	33319	9	
		City	,	Zip Code	;	
New Designatured Agent's Cignoture if shonging	Dagistanad Agants					

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

Page 1 of 2

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

Title	Name	Address	Type of Action
MGRM	Theodore Beverly	10588 W Sample Rd Coral Springs, FL 33065	Add Remove
<u>MGRM</u>	Jacquelyn Leslie	4211 NW 41 Street # 409 Ft Lauderdale, FL 33319	✓ Add Remove
			Add Remove
<u> </u>			Add Remove
			Add Remove
	·		Add Remove
D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
			- -
	uky 16. 2012		- -
Dated	Jacquel	n.M. Heslin	
	JACQ	UELYN LESLIE	
	Typed or	printed name of signee	

Page 2 of 2

Filing Fee: \$25.00