# L110000056657

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t. Hampton

OCT 1 2 2011

EXAMINER

## **COVER LETTER**

Division of Co					
SUBJECT:		LH, LLC			
	Name of Limi	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Nicole Suissa			
		Name of Person			
Firm/Company					
	1:	204 NE 91st STREET			
		Address			
		MIAMI FL 33138 City/State and Zip Code			
	F-mail address: (	fo@signaturebid.com to be used for future annual report not	ification)		
			incuron,		
For further information	concerning this matter, please of	eall:	·		
Nicole Suissa		at ( 305 )	608-0139		
Name	of Person	Area Code & Daytii	me 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 enclose	Certificate of Status & Certified Copy (additional copy is enclosed)		

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tailahassee, 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

FILED

2011 OCT 11 PM 2:55

SLH,	LLC	<u></u>	STATE
SLH, (Name of the Limited Liability Compa (A Florida Limited	ny as it now appea Liability Company)	rs on our records	SSEE, FLORIDA
The Articles of Organization for this Limited Liability Company			
Florida document numberL11000056659			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company he	re:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Comp	any," the designation "l	LLC" or the abbreviation
Enter new principal offices address, if applicable:	Nicole Suiss	а	
(Principal office address MUST BE A STREET ADDRESS)	1204 NE 91ST STREET		
	MIAMI, FL 3	3138	
Enter new mailing address, if applicable:	SLH LLC		
(Mailing address MAY BE A POST OFFICE BOX)	1204 NE 915	ST STREET	
	MIAMI FL 33	138	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:		our records, <u>enter (</u>	the name of the new
New Registered Office Address:	Er	nter Florida street add	lress
		, Florida	
<del>.</del>	City	, rivilua	Zip 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>	Name	Address	Type of Action		
MGR	BOURGADE, LAURENT	6538 COLLINS AVE #402 MIAMI BEACH, FL 33141	Add  Remove		
MGR	FARHAT, CHRISTY	6538 COLLINS AVE #402 MIAMI BEACH, FL 33141	Add  Remove		
MGR_	BENARROCH, MICHEL	12901 OLEANDER ROAD NORTH MIAMI, FL 33181	✓ Add  Remove		
MGR	GALLULA, JOSIANE	851 NE 70TH STREET MIAMI, FL 33138	✓ Add ☐ Remove		
			Add Remove		
	***************************************		Add Remove		
D. If amei	nding any other information, enter cha	ange(s) here: (Attach additional sheets, if necessa	FILED 2011 OCT 11 PH 2: 55 SHUNE JARY OF STATE STATLAHASSEE, FLORIDA		
Dated	OCTOBER 6TH , 2011  Signature of a member or authorized representative of a member				
	Tyr	Nicole Suissa			

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Filing Fee: \$25.00