

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : KAT2 BASKIES LLC

Account Number : I20080000071

Phone : (561)910-5700

Fax Number

: (561)910-5701

\*\*Enter the email address for this business entity to be used for futurem annual report mailings. Enter only one email address please.

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ORIAL INVESTMENTS LLC

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SECRETARY OF STATE
ANASSEE FLORIDA

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## **COVER LETTER**

TO: Registratio Division of	n Section Corporations		
SUBJECT:	Orial In	vestments LLC	•
		ited Liability Company	<del></del>
	s of Amendment and fee(s) are sulespondence concerning this matter		
		Thomas O, Katz	
		Name of Person	
		Katz Baskies LLC	· 
		Firm/Company	
	2255	Glades Road Suite 240W	
		Address	
	В	oca Raton, FL 33431	
		City/State and Zip Code	
	E-mail address: (	as.katz@katzbaskies.com to be used for future annual report noti	fication)
Por further informati	on concerning this matter, please of	oali:	
	Thomas Katz	at ( 561 )	910-5700
Na	me of Person	Area Code & Daytin	ne Telephone Number
Enclosed is a check i	for the following amount:		
\$25.00 Piling Foo	\$30,00 Filing Foo & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certificate of Status &  Certified Copy (additional copy is enclosed)
	AILING ADDRESS:	STREET/COUR	

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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## ARTICLES OF AMENDMENT TOARTICLES OF ORGANIZATION OF

Orial Investments 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 6/13/2011 and assigned
Florida document numberL11000068789
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 abbreviatio "L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Vo. 4
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)
IMMINING MUNICES MAY BE A FOST OFFICE BOAT
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:
New Registered Office Address:
Enter Florida street address
City , Florida 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 familians 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

MGR = Manager

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:

MGRM = Managing Member Title <u>Name</u> Address Type of Action MGRM Springboks Enterprises, LLC 20900 NE 30 Avenue bbA 🔲 Aventura, FL 33180 **√** Remove Orial Management Incorporated 20900 NE 30 Ave Suite 610 Add Remove MGR Aventura FL 33180 ☐ Add ☐ Remove Add Remove □Add Remove ∐Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Thomas O. Katz

> Typed or printed name of signee Page 2 of 2

> > Filing Fee: \$25.00