

**L11000072301**

**Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : SIEGELAUB, GOLDING, & FELLER, P.A.  
Account Number : I19990000058  
Phone : (954) 753-2222  
Fax Number : (954) 753-1123

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

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
M.O. LUCAYA, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED

11 OCT 17 AM 7:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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11 OCT 17 AM 8:39

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Help

B. BOSTICK

OCT 18 2011  
10/14/2011

EXAMINER

11 11 000 0 1 11 1 1

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M.O. Lucaya, 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 6/21/11 and assigned  
Florida document number L11000072301.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

**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

\_\_\_\_\_, Florida \_\_\_\_\_  
City 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

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10-14-'11 18:07 TO- 18506176383

FROM- SIEGELAUB PA, INC

P0003/0003 T-759 F-628

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	Ouzi Zafrani	12772 N.W. 11th Court Sunrise, FL 33323	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Maor Zinger	2720 N.E. 44th Street Lighthouse Point, FL 33064	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	M O Property Investments, LLC	12772 N.W. 11th Court Sunrise, FL 33323	<input checked="" type="checkbox"/> Add <input 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

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

Dated October 14, 2011

  
Signature of a member or authorized representative of a member

Ouzi Zafrani

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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