# #L110000073448

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K.SALY EXAMINER JUL 102014

### **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: Berm	uda Blue Vac	ation Apts. LLC	
SCHOLET.		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Harold M. G	arber	
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	Harold M. G		
		Firm/Company	
	2999 NE 19	1 St #900	
		Address	<del>, ,,,,,,,,</del>
	Aventura, Fl	L 33180	
		City/State and Zip Code	
	hmgarber@bellse	Outh.net to be used for future annual report notifi	
For further information c	oncerning this matter, please c	•	canon
Harold Gar	ber	<sub>at</sub> (305 <sub>)</sub> 332-13	335
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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

FILED 2014 JUL-9 AMII: 34

#### BERMUDA BLUE VACTION APTS, LLC

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited Liability Company were filed on June 24, 2011 and assigned Florida document number <u>L110</u>00073448 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." 3032 E Commercial Blvd #120 Enter new principal offices address, if applicable: Ft Lauderdale, FL 33308 (Principal office address MUST BE A STREET ADDRESS) 3032 E Commercial Blvd #120 Enter new mailing address, if applicable: Ft Lauderdale, FL 33308 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the r registered agent and/or the new registered office address here: Harold M Garber Name of New Registered Agent: 2999 NE 191 St #900 New Registered Office Address: Enter Florida street address , Florida <u>3</u>3180 Aventura City

#### New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capodity. I further agree to comply with t 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, <u>enter the title, name, and address of each Manageral Authorized Member being added or removed from our records</u>:

MGR = Manager .
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Achiaz A Oz	1300 NE Miami Gardens Dr #221	E □ Add
		Miami, FL 33179	■ Remove
MGR	Achiaz Oz	3032 E Commercial Blvd #120	O ■ Add
		Ft Lauderdale, FL 3330	8_□ Remove
MGRM	Lea L Attas	20941 NE 21 Ct	□ Add
		Miami, FL 33179	Remove
MGR	Lea Lily Attas	3032 E Commercial Blvd #120	 O■ Add
		Ft Lauderdale, FL 3330	8_□ Remove
			Add
			□ Remove
			□ Add
			_□ Remove

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•	
ffective date, if other than the date of filing:  the effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more the date this document is filed by the Florida Department of State)	(optional) e than 90 days after
Dated	
Signature of a member or authorized representative of a m	

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Filing Fee: \$25.00