

L11000090487

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100242172251

12/03/12--01013--026 **25.00

FILED
2012 DEC -3 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan DEC - 4 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **BRAMAR LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Damian Nusynkier

Name of Person

Sti Management LLC

Firm/Company

1990 NE 163rd St. #209

Address

North Miami Beach, FL 33162

City/State and Zip Code

dnusynkier@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Damian Nusynkier

Name of Person

at (**786**) **553-7228**

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

FILED

2012 DEC -3 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BRAMAR 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 08/08/2011 and assigned
Florida document number L11000090487.

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)

1990 NE 163 Street #209

North Miami Beach, FL 33162

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1990 NE 163 Street #209

North Miami Beach, FL 33162

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

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:

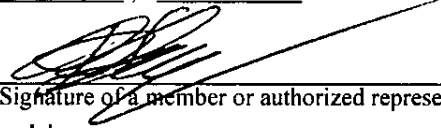
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Damian Nusynkier	1990 ne 163 St #209	<input checked="" type="checkbox"/> Add
		North Miami Beach, FL 33162	<input type="checkbox"/> Remove
MGR	Mirta Julia Medvedovsky	1990 ne 163 St #209	<input checked="" type="checkbox"/> Add
		North Miami Beach, FL 33162	<input type="checkbox"/> Remove
MGR	Martin SZURMAN	3131 NE 188 ST. #1-608	<input type="checkbox"/> Add
		Aventura, FL 33180	<input checked="" type="checkbox"/> Remove
MGR	Brian GLANCSPIGIEL	3131 NE 188 ST. #1-608	<input type="checkbox"/> Add
		Aventura, FL 33180	<input checked="" 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 NOVEMBER 27, 2012.



Signature of a member or authorized representative of a member

Damian Nusynkier

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2012 DEC -3 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA