SERBER AND ASSOC

2001/005

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : SERBER & ASSOCIATES, P.A.

Account Number : I20000000083 Phone : (305)932-6262 Fax Number : (305)933-9393

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LUCHIA LEADER LLC

Certificate of Status	0
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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

LUCHIA LEADER 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:

Daniel J. Serber

Name of Person

Serber & Associates, P.A.

Firm/Company

2875 NE 191st Street, Suite 801

Address

Aventura, FL 33180

City/State and Zip Code

info@serberlawfirm.com

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

For further information concerning this matter, please call:

Yolanda L. Fornaris

305, 932-6262

Name of Person

Area Code

Dayrime Telephone Number

Enclosed is a cheek for the following amount:

■ \$25.(X) 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

LUCHIA LEADER LLC		
(Name of the Lig	died Linbility Company as it now appears on our (A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Florida document number <u>L11000103689</u>		011 and assigned
This amendment is submitted to unread the for	llawing:	
A. If amending name, enter the new name	of the limited liability company here:	
The new mane must be distinguishable and end with the	words "Limited Liability Company," the designati	on "LLC" or the ablueviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
		and the second s
Enter new mailing address, if applicable:		一点 历
(Mailing address MAY BE A POST OFFICE		
B. If unending the registered agent and registered agent and/or the new registered of	for registered office address on our reffice address here:	100
		京 6
Name of New Registered Agent:	Nir Shoshani	77 P
New Registered Office Address:	Enter Plorida street	aktore
	City	, Florida Zip Code
New Registered Agent's Signature, if changing	Regimered Agent:	
I hereby accept the appointment as registere provisions of all statutes relative to the propaceout the obligations of my position as registery filed to merely reflect a change in the company has been notified in writing of this	er and complete performative of my duli stered agent as provided for in Chapter registered office address, I hereby confir change.	es, and I am familiar with and 605, F.S. Or, if this document is in that the limited liability
	If Changing Registered Agent, Signs	mile of tern Registered Vacial

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MGR = Manager

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

AMBR≈ A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR Nir Shoshani 1111 Par		1111 Park Centre Blvd Suite 4	450
		MIAMI, FL 33169	■ Remove
AR	S & A Company Management, LLC	2875 NE 191st Street, Suite 8	01 ■ ∧dd
		Aventura, FL 33180	 □ Remove
			Add
			15 Add Remarks
Nagel and Application of the Control			Add C
			Remove

. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
1) The management of the Limited Liability Company is reserved to the
members.
Effective date, if other than the date of filing:
an 90 days after the date this document is filed by the Florida Department of State.
DatedApril 09, 2015.
Signature of a member or authorized representative of a member
Nir Shoshani – Manager Typed or printed name of signee

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