## L11000 108004

(Requestor's Name)
•
(Address)
(Address)
(Address)
,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dogument Number)
(Document Number)
Certified Copies Certificates of Status
·

Special Instructions to Filing Officer:

A. LUNT

NOV -8 2011

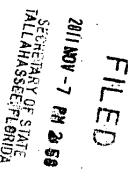
**EXAMINER** 

Office Use Only



500213864175

型/07/11--01019--019 \*\*25.00.



Registration Section

or

## **COVER LETTER**

rporations			
2144 N	E 3rd Way, LLC	,	
Name of Lim	ited Liability Company		
		•	
Amendment and fee(s) are su	bmitted for filing.		
ondence concerning this matter	r to the following:		
	Janna Segien		
	Name of Person	, , , , , , , , , , , , , , , , , , ,	
2	144 NE 3rd Way, LLC		
	Firm/Company	<del></del>	
	2144 NE 3rd Way	A P	,
	Address	5 C1 <b>2</b> 2 <b>2</b>	. <b>~</b> n
		HA T	- 8
			1
	•		
jar	nasegien@gmail.com		12
	•		
concerning this matter, please o	call:	90	<b>9</b> ··
inna Saglen	at ( 561 ) 9	26 <del>-4</del> 262.	
f Person			
		•	
he following amount:			
\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclo	sed)
	2144 NI Name of Lim Name of Lim Amendment and fee(s) are su ondence concerning this matter  2  E-mail address: ( concerning this matter, please of the second secon	2144 NE 3rd Way, LLC Name of Limited Liability Company  Amendment and fee(s) are submitted for filing.  Indence concerning this matter to the following:  Janna Segien Name of Person  2144 NE 3rd Way, LLC Firm/Company  2144 NE 3rd Way Address  Boca Raton, FL 33431 City/State and Zip Code jannasegien@gmail.com E-mail address: (to be used for future annual report notifies concerning this matter, please call:  Inna Segien  at (561)  9 Area Code & Daytime 1  105 130.00 Filing Fee & Certificate of Status  Cartified Copy	2144 NE 3rd Way, LLC  Name of Limited Liability Company  Amendment and fee(s) are submitted for filing.  Indence concerning this matter to the following:  Janna Segien  Name of Person  2144 NE 3rd Way, LLC  Firm/Company  2144 NE 3rd Way  Address  Boca Raton, FL 33431  City/State and Zip Code  jannaseglen@gmail.com  E-mail address: (to be used for future annual report notification)  E-mail address: (to be used for future annual report notification)  Person  Area Code & Daytime Telephane Number  are following amount:  [\$30.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section
Division of Corporations P.O. Box 6327 Tallahussee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

4/ 5

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	2144 NE 3rd V	Vay, LLC			
(Name of	the Limited Liability Company a (A Florida Limited Liab	is it now appears on our recon	ds.)		
The Articles of Organization for the		re filed on September 2	1, 2011 and assigned		
Plorida document number	45-3340671				
This amendment is submitted to an	end the following:	••	771		
A. If amending name, enter the r	new name of the limited liability	company here:	AHAS AHAS		
The new name must be distinguishabl "L.L.C."	e and end with the words "Limited	Liability Company," the design			
Enter new principal offices addre	ss, if applicable:		F0 8		
(Principal office address MUST R	E A STREET ADDRESS)	·•	<b>5</b> € €		
Enter new mailing address, if app	licable:	e I			
(Mailing address MAY BE A POS	TOFFICE BOX)	***			
•	· -	1 gaz ngi			
The Million of the contract of					
B. If amending the registered registered agent and/or the new r	agent and/or registered office e <u>clatered office address here</u> :	address on our records,	enter the name of the new		
Name of New Registered	Agent:				
New Registered Office Ac	ldress:	**			
·		Enter Florida street address .			
		, Flor	ida		
	C	ity	Zip Code		
New Registered Agent's Signature, i	f 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

MGR = Manager

MGRM = Managing Member

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:

Title	Name	Address	Type of Action
<u>MGRM</u>	Janna Segien	2144 NW 3rd Way Boca Raton, FL 33431	☑ Add ☐ Remove
			Add Remove
<del></del>			Add Remove
<del></del>			Add Remove
<u>_</u>	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
D. If amending	g any other information, enter change(s	) here: (Attach additional sheets, if necessary.)	-
			2011 NOV -7
Dated	0/29/11 Deana Nagin		
<b>A</b> -	$\theta$	authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00