

L11000121915

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

NOV - 8 2012

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PHA INVESTMENTS, 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:

ALAN J. MARCUS, ESQ.

Name of Person

Firm/Company

20803 BISCAYNE BOULEVARD, SUITE 301

Address

AVENTURA, FL 33180

City/State and Zip Code

ALAN@ALANJMARCUS.COM

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

For further information concerning this matter, please call:

ALAN J. MARCUS, ESQ.

Name of Person

at (305)

937-1800

Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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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**

PHA INVESTMENTS, 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 10/25/2011 and assigned Florida document number L11000121915.

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)

2300 North Surf Road

Hollywood, FL 33019

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2300 North Surf Road

Hollywood, FL 33019

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:

JMN Holdings LLC

New Registered Office Address:

2300 North Surf Road

Enter Florida street address

HOLLYWOOD

, Florida

33019

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

Jeremy Noy, Manager

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	Jeremy Noy	2300 North Surf Road	<input checked="" type="checkbox"/> Add
		Hollywood, FL 33019	<input type="checkbox"/> Remove
MGR	Frederic Cilins	19667 Turnberry Way	<input type="checkbox"/> Add
		Unit #PH-A	<input checked="" type="checkbox"/> Remove
		Aventura, FL 33180	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

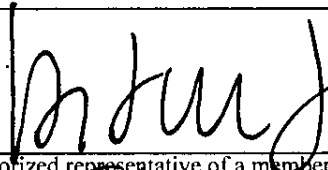
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated

Nov 5, 2012



Signature of a member or authorized representative of a member

Alan J. Harris, Atty.

Typed or printed name of signee

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Filing Fee: \$25.00

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