

Division of Corporations

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L11000138223

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BARBOSA LAW OFFICE
Account Number : 120110000049
Phone : (305) 421-6339
Fax Number : (305) 350-9543

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

Email Address: hbarbosa@barbosalegal.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ENGELHART ENTERPRISE, LLC.**

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J. SAULSBERRY
EXAMINER

OCT 3 2013

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Corporate Filing Menu

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H130002193143
COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **ENGELHART ENTERPRISE, 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:

Julio Barbosa

Name of Person

Barbosa Law Office

Firm/Company

2000 Ponce de Leon Blvd., Suite 625

Address

Coral Gables, FL

City/State and Zip Code

jbarbosa@barbosalegal.com

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

For further information concerning this matter, please call:

Julio Barbosa

Name of Person

305.421-6339

at ()

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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ENGELHART ENTERPRISE, 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 12/06/2011 and assigned
Florida document number L11000138223

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal officers address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

255 Palm Avenue

Miami Beach, FL 33139

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

255 Palm Avenue

Miami Beach, FL 33139

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:

N/A

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

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

N/A

Dated October 2 2013

Bruna Barbosa

Signature of a member or authorized representative of a member

Bruna Barbosa, Esq.

Typed or printed name of signer

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Filing Fee: \$25.00

2013 OCT -2 AM 8:17
DIVISION OF CORPORATIONS
STATE OF NEW YORK

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