

L12000016928

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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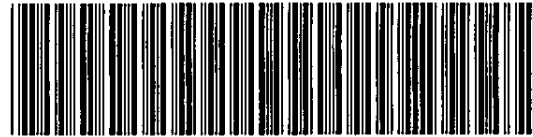
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB 17 PM 12:06

FEB 20 2012

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Triple Five Florida 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:

Isaac Kaszyp
Name of Person

Triple Five Florida LLC
Firm/Company

18851 NE 29th Avenue Suite 1011
Address

Aventura, Florida 33180
City/State and Zip Code

isaac@kaszy.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Isaac Kaszyp at (917) 515 6000
Name of Person 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

WARREN KASZTL
18851 N.E. 29th AVENUE – SUITE 1011
AVENTURA, FLORIDA 33180
305-542-4865
warren@kasztl.com

February 16, 2012

Attachment to Amendment to add a manager/member
Florida Department of State
Division of Corporations

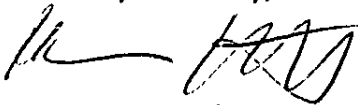
To whom it may concern:

The attached amendment is being submitted to add Warren Kasztl as a manager/member of Triple Five Florida LLC. His role within the corporation is to serve as the licensed real estate broker, which is a requirement of the Florida Real Estate Commission.

Warren Kasztl's broker license number is BK3144812 and is valid until September 30, 2013.

If you are in need of any further information, please do not hesitate to contact us.

Thank you kindly,

A handwritten signature in black ink, appearing to be 'W. Kasztl', written over a horizontal line.

Warren Kasztl
Manager/Member, Triple Five Florida LLC

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

Triple Five Florida 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 February 3, 2012 and assigned
Florida document number L12000016928.

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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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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>
Manager/Member	Warren KASZTL	18851 NE 29 th Avenue Suite 1011 Aventura, Florida 33180	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated February 16, 2012.


 Signature of a member or authorized representative of a member
 ISAAC KASZTL
 Typed or printed name of signee

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 DIVISION OF CORPORATIONS
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