112000023808

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	.
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Amend		

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SECRETARY OF STATE
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T. Sureh OCT - 7 2013

KOCHMAN & ZISKA PLC

Ronald S. Kochman* Maura A. Ziska

Marvin S. Rosen, Counsel.

- *Also admitted in New York
- · Also admitted in Michigan

Esperanté 222 Lakeview Avenue, Suite 1500 West Palm Beach, Florida 33401

Telephone: (561) 802-8960 Facsimile: (561) 802-8995

October 2, 2013

Florida Department of State Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

Re: Beachside 130 LLC

Document #L12000023808

Dear Sir/Madam:

Enclosed are Articles of Amendment to Articles of Organization for Beachside 130 LLC. Also enclosed is a check in the amount of \$25 representing the filing fees.

If you have any questions, please call me.

Sincerely,

Enclosures

00020481.DOC

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Beachside	e 130 LLC			
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appe	ars on our records.)		
(A Florida Elimited L	liaonity Company,			
The Articles of Organization for this Limited Liability Company	were filed on	2/17/2012	and assigned	
Florida document number L12000023808	_	· · · · ·		
Piorida document number				
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 "Limi	ited Liability Com	pany," the designation	n "La C'-or the abbreviation	
"L.L.C."			SEE CO	
Enter new principal offices address, if applicable:	c/o First Re	public Bank		
(Principal office address MUST BE A STREET ADDRESS)	241 Royal I	Palm Way	Ω <u>Ω</u>	
	Palm Beach	n, FL 33480	52 DA	
Enter new mailing address, if applicable:	c/o First Re	public Bank		
(Mailing address MAY BE A POST OFFICE BOX)	241 Royal I	Palm Way		
	Palm Beach, FL 33480			
		•		
B. If amending the registered agent and/or registered of	ffice address on	our records, ente	er the name of the new	
registered agent and/or the new registered office address her	<u>·e</u> :			
Name of New Registered Agent:				
New Registered Office Address:				
New Registered Office Address: Enter Florida street address				
		Tila et da		
	City	, Florida	Zip Code	
	,		-7	

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 of Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
·	-	 	Add	
			Remove	
			Add	
			IA SE	
		, 	Remove THASSEE, F	
			LED SSEE, FI	
			PA 3 52 FLORIDA	
			Remove	
				
			Add	
			Remove	
			Add	
			Remove	
			Add	
			Remove	

P. If amer	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
-	
_	
_	
Dated	Oct be 2 , 2013 .
	Signature of a member or authorized representative of a member
	Ronald S. Kochman
	Typed or printed name of signee

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Filing Fee: \$25.00

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