L12000027641

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COVER LETTER

TO:

Registration Section

Division of Corporations

SUBJECT:

PRESIDENTIAL PLAZA 4, 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:

Ross P. Beckerman

Name of Person

Tim A. Shane P.A.

Firm/Company

4400 N. Federal Highway, Ste 307

Address

Boca Raton, FI 33431

City/State and Zip Code

ross@timashane.com

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

For further information concerning this matter, please call:

Ross P. Beckerman

at (561) 886-5580

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
200 OCT 21 AM II: 50
SECRETARY OF STATE

SECHATARY OF STATE. TALLAMASSEE, FLORIDA

opears on our records.)

PRESIDENTIAL PLAZA 4, LLC				
Name of the Limited Liability Company as it now	y aj			
(A Florida Limited Liability Con	npa			

The Articles of Organization for this Limited Lia	bility Company were filed on Februa	ary 27, 2012 and assigned
Florida document number <u>L12000027641</u>	·	
This amendment is submitted to amend the follow	ving:	
A. If amending name, <u>enter the new name of t</u>	he limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE B	OX)	
B. If amending the registered agent and/or registered agent and/or the new registered officers.	registered office address on our r ce address here:	records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter F	lorida street address
	City	, Florida Zip Code
	~ <i>y</i>	Zip Couc

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

IGR = Ma IGRM = N	nager Ianaging Member		
<u>`itle</u>	<u>Name</u>	Address	Type of Action
MGR	Yevgeniy Yermakov	4800 N. Federal Highway	Add
		Suite 104 A	Remove
		Boca Raton, Fl 33431	
/IGR	Tetyana Yermakova	4800 N. Federal Highway	✓ Add
		Suite 104 A	Remove
		Boca Raton, Fl 33431	N o.
			Add
			Remov
			Add
			. Remov
·			Add
			Remov
			_
	•		Add

If amending any other i	information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated August	2013
Yevgeniy	Signature of a member or authorized representative of a member Yermakov

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Filing Fee: \$25.00

SECRETARY OF STATE