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**EXAMINER** 



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Contact: Panagiota Lazarou-Amanna

Daytime #: (954) 610-4570

Return Address: CO/ Flashback Diner 220 South Federal Hwy Hallandale Beach, FL 33009

## **COVER LETTER**

TO: Registration Section , Division of Corporations			
SUBJECT: Highlands	Equity Investments LI	<u>C</u>	
The enclosed Articles of Amendment and for Please return all correspondence concerning	· ·	12 DEC 26	
	Panagiota Lazarou-Amanna		
	Name of Person		
C/O Flashback Diner Firm/Company		A SSEE, FLOAIDA	
	220 South Federal Hwy		
	Address		
	Hallandale Beach, FL 33009  City/State and Zip Code		
——————————————————————————————————————	Toula.Amanna@gmail.com ail address: (to be used for future annual report notificat	ion)	
For further information concerning this mat	•	,	
Panagiota Lazarou-Am	anna at ( 954 ) 61	10-4570	
Name of Person	Area Code & Daytime T		
Enclosed is a check for the following amou \$25.00 Filing Fee \$30.00 Filing Certificate	nt: Fee & \$\int\\$55.00 Filing Fee &	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS:	STREET/COURIER	R ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ame of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) April 30, 2012 The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ Florida document number <u>L12</u>000 57631 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 City

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Thomas Bertorelli	220 South Federal Highway Hallandale Beach, FL 33009	Add Remove
<u>MGRM</u>	Rochelle Matza	220 South Federal Highway Hallandale Beach, FL 33009	Add ✓ Remove
			Add Remove
D. If amen	ding any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary.)	<del></del>
_			
	December 3	2012	<del></del>
Dated	Rom	awu - Luauu - nber or authorized representative of a member	
	- · ·	nagiota Lazarou-Amanna	
		yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00