

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H150002683673)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KATZ BASKIES LLC

Account Number : I20080000071 Phone : (561)910-5700

Fax Number : (561)910-5701

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

Email Address: + Homas. Katz @ Katzbaskies-Com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DIAMOND SANDS MARINA, LLC

Certificate of Status	0
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P. 002

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COVER LETTER

TO:	Reg Divi	istration Se iston of Cor	ection porations			
SUBJ	rct.		ands Marina, LLC			
50110	ECI,	,	Name of Lin	tited Liability Company		
The en	iclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return	all correspo	ondence concerning this matter	to the following:		
Thomas O, Katz						
			-	Name of Person		
			Katz Baskies LLC			
				Firm/Company		
		•	2255 Glades Road Suite 24	40W		
				Address	· · · · · · · · · · · · · · · · · · ·	
		City/State and Zip Code				
			thomas.katz@katzbaskics.c			
				to be used for future annual report not	fication)	
For fu	rther in	formation c	oncerning this matter, please co	all:		
Thoma	as O. K	atz		561 910-5700 at ()	•	
		Nume o	f Person	Area Code Daytim	e Telephone Number	
Enclos	ed is a	check for th	ne following amount:			
■ \$ 2	5.00 Fi	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional capy is enclosed)	□ \$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)	
		Registr	ING ADDRESS: ation Section	STREET/COUR! Registration Section Division of Como	on	

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

FAX No. 561-910-5701

P. 003

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H15000268367 3

Diamond Sands Marina, LLC				
(Name of the Limit	ted Liability Compa (A Florida Limited)	ny as it now appears on our re Liability Company)	cords.)	
The Articles of Organization for this Limited I. Florida document number L12000060714 This amendment is submitted to amend the following the control of th	_ 	were filed on <u>5/4/2012</u>	and assigned	
A. If amending name, enter the new name of	f the limited liab	ility company here:		
The new name must be distinguishable and contain the	vords "Limited Liabi	lity 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)		6360 NW 5th Way		
		Suite 302		
		Ft. Lauderdale, FL 33309	FO Si	
		6360 NW 5th Way	WOV 10	
		Suite 302		
		Ft, Lauderdale, FL 33309	<u>' (') (3) (') (') () () () () () () () (</u>	
B. If amending the registered agent and registered agent and/or the new registered o	or registered of	ffice address on our rec e:	cords, enter the hame of the nev	
Name of New Registered Agent:	Katz Baskies LLC			
New Registered Office Address:	2255 Glades Ro			
		Enter Florida street a	ddress	
	Boca Raton		, Florida ³³⁴³¹	
	_	City	Zip Code	
Now Designatured Agentle Signature if changing	Dagiotared Agents			

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 605, 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.

f Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person H15000268367 3

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Beta Invstment Group, Inc.	6360 NW 5th Way, Suite 302	■ Add
		Ft. Lauderdale, FL 33309	□ Remove
•			□ Change
MGRM	AJF Investments LLLP	1645 Palm Beach Lakes Blvd, 1200	
		West Palm Beach, FL 33401	■ Remove
			Change
		,	Add
			Remove
			Change
			Remove
			Change
			D Add
			□ Remove
			Change
	· ·		Add
			□ Remove
			□ Change

	AM Katz Baskies LLC	FAX No. 561-910-5701	P. 005
D. If amending any of	her information, enter change(s) here	: (Attach additional sheets, if necessary.)	H150002683
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E. Effective date, if oth	ner than the date of filing:	(optional) to date of filing or more than 90 days after filing.) Pur	muont to GOS 0707 /7
Note: If the date inse		able statutory filing requirements, this date will	
document's effective	date on the Department of State's records.		
		t an effective time, at 12:01 a.m. on t	the earlier of:
b) The 90th day af	ter the record Is filed.		
Dated November 10	2015	,	
	200- 9		
		= -	
کے	Signalure of a member or author	rized representative of a member	 -

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Filing Fee: \$25.00