112000006538

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100301368231

07/25/17--01027--016 **55.00



K. SALY JUL 3 1 2017

Thermagem LLC

17846 Ne 5th Ave Miami, FL 33162

7/20/2	002/
· · · · · · · · · · · · · · · · · · ·	1

Amending authorize person from Thermagem LLC

Bsd

To Whom It May Concern,

My name is Eran Brosh and I'm the owner of Thermagem LLC.

Enclosed, please find a request to remove Mr. Liron Ben Shimon from Thermagem LLC.

My day time phone number is: (443) 248 1679.

Email address: eran@brilliancenewyork.com

Return Address:

Eran Brosh

17846 NE 5TH Ave

Miami Beach FL 33162

Best Regards,

Eran Brosh

Founder & Vice President

Thermagem LLC

COVER LETTER

TO: Registration Se Division of Cor			
T	h.o. o.		
SUBJECT:	he Magen	ed Liability Company	·
The enclosed Articles of	Amendment and fee(s) are subm	itted for filing	
Please return all correspo	ondence concerning this matter to	the following:	
	ERA	N BROSH	<u> </u>
	_ Thermo	agen LL	<u> </u>
	17846 NE	' '	
		Address	. ,
	Mani F	L 33/62 City/State and Zip Code	
	erun@brillia	nce new doric.	(om
For further information c	oncerning this matter, please call	ì	meanon
Udi Bros	<u>h</u>	at (<u>443)</u> <u>248</u> Area Code Dayth	1679
Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	he following amount:		
S25 00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55 00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ING ADDRESS:	STREET/COUR Registration Secti	HER ADDRESS:
	on of Corporations ox 6327	Division of Corpo Clitton Building	brations
	issee, FL 32314	2661 Executive C	
		Tallahassee, FL 3	\$501

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF A	MENDMENT		
TO		\.	C^* .
ARTICLES OF OR OF	GANIZATIO	[N	THE KIND
~1	116		2017 ML 25 PM 4: 00 TALLAHASSEL FIORIO.
Nermagem	as it now appears on a	our records	25 PM.
(Name of the Limited Liability Company (A Florida Limited Liab			MELAHARAY 4:00
The Articles of Organization for this Limited Liability Company wa	ere tiled on <u>05 //</u>	4/2012 and assigned	1 MSSET. F.S./A/r
Florida document number <u>L 12 0000 655 37</u> .			ORIG.
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabilit	v company here:		
The training material extension and the state of the stat			
The new name must be distinguishable and contain the words "Limited Liability	Company," the designa	ation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
			<u> </u>
F			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
Stating maresy start DL A 1031 OF FIGE BOX			
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	ce address on our -	records, enter the name of the	<u>ne new</u>
Name of New Registered Agent:			
New Registered Office Address:			
	Lnier Islanda si	rvet address	
	City	, Florida	
New Registered Agent's Signature, if changing Registered Agent:		<i></i>	
Thereby accept the appointment as registered agent and agree			
provisions of all statutes relative to the proper and complete pe accept the obligations of my position as registered agent as pro			
being filed to merely reflect a change in the registered office ac			• •
company has been notified in writing of this change.			
If Changi	ng Registered Agent, §	ignature of New Registered Agent	
Page 1 c	of 3		

MGR = Man: AMBR = Auth	iger orized Member			
<u>Title</u>	Name	Address	Type of Action	
President	Liron Ben Shimon	300 NE 183 Ed St	D ∧dd	
		Miani FL 33179	e cmove	
			Change	
			Remove	
			Change	
				2011 JUL 25 PH 4: 80
			□ Remove	25000000000000000000000000000000000000
		<u> </u>	Change	STOP P
			Add	F. 80
			D Remove	
			□ Change	
			D Add	
			D Remove	
			D Change	
			D Add	
			Remove	
			☐ Change	

f [*] amen	ding any other information, enter c	hange(s) here: ///ttach/ada	tional shee	ts, if necessary.)	
, _					
_	· 	·	<u> </u>		
_			<u> </u>		$ \mathcal{E}_{I_{I}}$
_					20/1 " \ E/
					JUI 25
					ZOIT SUI 25 PM 4:
_					"ASSIF. F. STAT.
_			į		- IALLAHASSEE. FLORING
_					
_					
_			_		
	·		\ \ \		
_					·······
					
					-
_					
		07-20-20			
an effec <u>(ote:</u> li	e date, if other than the date of filin tive date is listed, the date must be specific an if the date inserted in this block does not it's effective date on the Department of	d cannot be prior to date of filing o neet the applicable statutory fi	r more than 90		
	ord specifies a delayed effective of the day after the record is filed		e time, at	12:01 a.m. on the	e earlier of:
ated _	07-20-2017				
	Signature of a	member or authorized representa	ive of a memb	ier l	
	ERAN BROS	Н			
		Typed or printed name of signer	:		
		D 7. 67			
		Page 3 of 3		1	