## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SERBER & ASSOCIATES, P.A.

Account Number : 120000000083

Fax Number

: (305)932-6262 : (305)933-9393

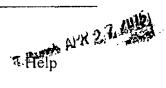
\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN REMO LEADER LLC

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Corporate Filing Menu



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## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

REMO LEADER 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:

Daniel J. Serber

Name of Person

Serber & Associates, P.A.

Firm/Company

2875 NE 191st Street, Suite 801

Address

Aventura, FL 33180

City/State and Zip Code

info@serberlawfirm.com

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

For further information concerning this matter, please call:

Yolanda L. Fornaris

305 932-6262

Natae of Person

Aren Code

Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25 00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status O \$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
Tallalassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REMO LEADER LLC	·	
(Nume of the Lin	ited Liability Company as it now appears on a (A Florida Limited Liability Company)	at tecords)
The Articles of Organization for this Limited Florida document number <u>L12000080103</u>	Liability Company were filed on 06/17/	2012 and assigned
This amendment is submitted to amend the fo	lowing:	
A. If amending name, enter the new name	of the limited liability company here:	
the new game must be distinguishable and end with the	words "Limited Liability Company," the design	ntion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	<u></u> ≥
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:	Apple Service	List D
(Mailing address MAY BE A POST OFFICE	BOX	
•	The state of the s	
B. If amending the registered agent and registered agent and/or the new registered of		records, enter the name of the new
$S_{\alpha}(t) = \partial t$		
Name of New Registered Agent:	Nir Shoshani	
New Registered Office Address:		
	Enjar Flurida stri	•
		Florida Xip Cade
No. 12 de la companya de descriptor de la companya de descriptor de la companya del companya de la companya de		хір Сосы
New Registered Agent's Signature, If changing	-	in I familiar group to appropriately the
I hereby accept the appointment as register provisions of all staintes relative to the projeccept the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this	or and complete performance of my di istered agent as provided for in Chapte registered office address, I pereby com	ities, and Lam familiar with and or 605, F.S. Or, if this document is
	If Changing Legistered \ yent, Si	minture of New Registered Agent
	Page 1 of 3	

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

$MGR \approx M$ $AMBR = A$	anager uthorized Member		
Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Nir Shoshani	1111 Park Centre Blvd Suite 4	50 🗖 Add
		MIAMI, FL 33169	# Remove
AR_	S & A Company Management, LLC	2875 NE 191st Street, Suite 8	01 曾 Add
		Aventura, FL 33180	☐ Remove
			Add
			15 AFR 27 Pre u: 58
			Add
	·····		□ Remove

	i) The manager nembers.		change(s) here: (Attach additional sheets, if neces.	
				<u>-</u>
The effe	ective date must be s	pecific, cannot be pr	g: (opt rior to the date of receipt or filed date and cannot be the Florida Department of State.	ioual more
The effe 90 days	ective date must be s	pecific, cannot be pr focument is filed by	rior to the date of receipt or filed date and cannot be	íouaí more
The effe 90 days	s after the date this d	pecific, cannot be produced by 2015.	rior to the date of receipt or filed date and cannot be	ioual more

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