## L12000083852

(Req	uestor's Name)			
(Add	ress)			
(Add	ress)			
(City	/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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09/04/12--01008--008 \*\*25.00



J. BRYAN

SEP -5 2012

**EXAMINER** 

## **COVER LETTER**

	MGO RE I	MIRAMAR II LLC			
SUBJECT:	Name of Limi	ited Liability Company			
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
		Eyal Musli			
		Name of Person			
		Firm/Company			
	5700	Collins Avenue, Apt 14B			
		Address		Fe B	
	Mi	iami Beach, FL 33140			T!
	•	City/State and Zip Code			
	E-mail address: (	to be used for future annual report not	ification)	<b>新疆</b>	11
For further information co	oncerning this matter, please o	eall:		SEP-4 M 7:42	<b>***</b>
	/al Musli	at ( 786 )	7522801	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
Name of	Person	Area Code & Daytii	me Telephone Number		
Enclosed is a check for th	e following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	e of Status &	
MAILI	NG ADDRESS:	STREET/COUR	RIER 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

## MGO RE MIRAMAR II LLC

(Name of the Limited Liability	Company as it now appears Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability C L12000083852 Florida document number	• • • • • • • • • • • • • • • • • • • •	6/26/2012	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited</u>	ited liability company here Hollywood LLC	:		
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Compan	y," the designation "	LLC" or the abbreviation	
Enter new principal offices address, if applicable:			70 7	
(Principal office address MUST BE A STREET ADDR	(ESS)	<u></u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office add		ır records, <u>enter</u>	the name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
·	Enter Florida street address			
<del></del>	City	, Florida	Zip Code	

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

MGR = Manager

MGRM = Managing Member

**Type of Action Address** <u>Title</u> <u>Name</u> **MGRM** Samuel Obrasky 5700 Collins Ave, Apt 14B Miami Beach, FL 33140 Eyal Musli MGRM 5700 Collins Ave, Apt 14B Miami Beach FL 33140 \_ emove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated August 29 Signature of a member or authorized representative of a member Typed or the state of signee EYAL MUSLI Page 2 of 2

Filing Fee: \$25.00