## L12000087160

(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



000237717020

07/23/12--01047--023 \*\*25.00

12 JUL 23 PM 3: 14
SEVERILE SEE, FLORIDA

C. LEWIS

JUL 2 4 2012

EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corpor		<b>(</b> • K <sub>1</sub>	<i>.</i>	10-
SUBJE	ect:	Makhoul	Santos "LLC"		
		Name of Limit	ed Liability Company	- M - M - M - M - M - M - M - M - M - M	
The en	closed Articles of Arr	endment and fee(s) are sub	mitted for filing.		
Please	return all corresponde	ence concerning this matter	to the following:		
			George Makhoul		
	•		Name of Person		
			Firm/Company		
8			844 NW 10 terrace		
			Address		
		For	t Lauderdale FL 3331	1	
			City/State and Zip Code		
	-	gm	akhoul65@gmail.con o be used for future annual repo	net notification	<u> </u>
For fur	ther information cond	erning this matter, please co		or nomeacon	,
	<u></u>	e Makhoul	at ( 954 )		9477
	Name of Pe	rson	Area Code &	Daytime Telep	phone Number
Enclos	ed is a check for the f	ollowing amount:			
<b>√</b> \$25	5.00 Filing Fee [	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	nclosed)	\$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 Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

12 JUL 23 PM 3: 14

Makhoul Sa	antos LLC	SECRETAR	Y OF STATE	
Makhoul Sa ( <u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appea liability Company)	rs on our records ), S	SEE, FLORIDA	
The Articles of Organization for this Limited Liability Company				
lorida document numberL12000087160				
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liab</u>	ility company he	<u>re</u> :		
The new name must be distinguishable and end with the words "Limi L.L.C."	ted Liability Comp	any," the designation "I	LLC" or the abbreviation	
Enter new principal offices address, if applicable:	844 NW 10 Terrace unit 2			
Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale. FL 33311			
Enter new mailing address, if applicable:	844 NW 10	Terrace unit 2		
Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale. FL 33311			
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, enter t	the name of the nev	
Name of New Registered Agent:				
New Registered Office Address:	F	nter Florida street ada	Iress	
	121		•	
	City	, Florida	7in 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 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	George Makhoul	844 NW 10 Terrace unit 2  Fort Lauderdale, Florida 33311	_ ✓ Add ☐ Remove
<del></del>			Add Remove
			Add Remove
D. If amendin	g any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	_
		SS SEE	FILED 12 JUL 23 PM 3: 14
Dated	······································		M 3: 14
- -		r authorized representative of a member  tos r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00