

#L12000089283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

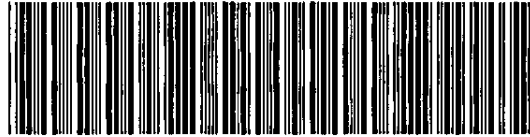
(Document Number)

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2015 MAY 22 PM 4:00  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

FILED

K. SALLY  
EXAMINER  
MAY 27 2015

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PARK 31 ACQUISITION 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:

MICHAEL TILLEY  
Name of Person

The Law + Title Office of Michael R Tilley  
Firm/Company

7999 N FEDERAL Hwy Ste 102  
Address

BOCA RATON, FL 33487  
City/State and Zip Code

Mike@MRTilley.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Tilley at ( 561 ) 258-2815  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

PARK 31 ACQUISITION LLC

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

FILED

2015 MAY 22 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ and assigned  
Florida document number L12000089283.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability 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) \_\_\_\_\_

7999 N FEDERAL HWY

STE 102

BOCA RATON, FL 33487

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida

City

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 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.

If 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 being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>             | <u>Address</u>                        | <u>Type of Action</u>                      |
|--------------|-------------------------|---------------------------------------|--|
| <u>MGR</u>   | <u>RAMDARIE, ERROL</u>  | <u>2417 JERICHO Turnpike</u>          | <input type="checkbox"/> Add               |
|              |                         | <u>STE 332</u>                        | <input checked="" type="checkbox"/> Remove |
|              |                         | <u>NEW HYDE Park, NY 11040</u>        | <input type="checkbox"/> Change            |
| <u>MGR</u>   | <u>PERSAUD, KRISHNA</u> | <u>5600 SW 12<sup>th</sup> Street</u> | <input checked="" type="checkbox"/> Add    |
|              |                         | <u>North LAUDERDALE, FL 33068</u>     | <input type="checkbox"/> Remove            |
|              |                         |                                       | <input type="checkbox"/> Change            |
|              |                         |                                       | <input type="checkbox"/> Add               |
|              |                         |                                       | <input type="checkbox"/> Remove            |
|              |                         |                                       | <input type="checkbox"/> Change            |
|              |                         |                                       | <input type="checkbox"/> Add               |
|              |                         |                                       | <input type="checkbox"/> Remove            |
|              |                         |                                       | <input type="checkbox"/> Change            |
|              |                         |                                       | <input type="checkbox"/> Add               |
|              |                         |                                       | <input type="checkbox"/> Remove            |
|              |                         |                                       | <input type="checkbox"/> Change            |

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2025 MAY 2 PM 4:00  
CLARK COUNTY  
CLARK COUNTY  
CLARK COUNTY

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

2019 MAY 22 PM 4:00  
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PALEH ASSOCIATES

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 5/19/15,                     

Signature of a member or authorized representative of a member

Erol Randarlie

Typed or printed name of signee