12/16/2014

# rtment of State Division of Corporations Electronic Filing Cover Sheet

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(((H140002904703)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: GILMAN CIOCIA INC.

Account Number : I20120000051

: (305)937-7773

Fax Number

: (815)301-2897

\*\*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

### **B&HPLANTATION, LLC**

Certificate of Status	0
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Page Count	04
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Corporate Filing Menu

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T. HAMPTON

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

B & H Plantation LLC

414000 291

(Name of the Limited Linbility Company as it now appears on our records.

(A Florida Limited Linbility Company) The Articles of Organization for this Limited Liability Company were filed on Sept 06, 2012 and assigned Florida document number L12000114596 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 end with 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) 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

#### 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

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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 ≈ Manager AMBR = Authorized Member		H14000290710	<b>う</b>
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Toledano, Liat	2999 NE 191st Street PH2	■ Add
		Aventura, FL 33180	☐ Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary,					
			H14000	2904703	
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£.	Effective date, if other than the date of filing (The effective date must be specific, cannot be prior to date this document is filed by the Florida Dopartmen	e of receipt or filed da	te and connor he more than	_ (optional) 90 days after	
	Dated Dec 16	2014			
	Eya-	l do	· .		
	Signature of a n	cinber-or nation ed	representative of a member		
	Eyal Levy, Member		•		
		Typed or printed nam	e of signee		

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Filing Fee: \$25.00

TILED 14 DEC 17 AM 7: 40 SECRETARY OF STATE A

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