## Li2000|250L3

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**EXAMINER** 



600241228006

10/29/12--01009--022 \*\*25.00



## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT:	38 NW 1	1th Street, LLC			
	Name of Limit	ted Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Debra Slifkin			
	Name of Person				
	Firm/Company				
	PO Box 9200 Address				
	Jupiter, FL 33468-9200				
	del	City/State and Zip Code braslifkin@yahoo.com			
For further information	E-mail address: (t concerning this matter, please c	to be used for future annual report notificational:	ion)		
	Debra Slifkin	at (	4-3002		
Name	of Person	Area Code & Daytime Te	elephone Number		
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Scorol Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Part is sometime in a compression typic suggested	the missal state authorize	Microprocessors 1		
Regis Divis P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente	ons		

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co (A Florida Limit	th Street, LLC mpany as it now appea ted Liability Company)	urs on our records.)	<del></del>			
The Articles of Organization for this Limited Liability Comp	and assigned					
Florida document numberL12000125063						
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited	liability company he	<u>re</u> :				
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Comp	any," the designation "	LLC" or the abbreviation			
Enter new principal offices address, if applicable:	6263 Robins	on Street	5. 9			
(Principal office address MUST BE A STREET ADDRESS	<u>y</u> Jupiter, FL 3	3458	01 29 L			
Enter new mailing address, if applicable:	PO Box 9200	)	FLOR			
(Mailing address MAY BE A POST OFFICE BOX)	Jupiter, FL 3	3468	Om 2			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address  Name of New Registered Agent:  Debra L	d office address on here: Slifkin Esq.	our records, <u>enter</u>	the name of the new			
New Registered Office Address: 6263 Ro	6263 Robinson Street					
	Enter Florida street address					
		, Florida	33458			
New Registered Agent's Signature, if changing Registered Ag	City		Zip Code			
A CHARLES OF THE STREET OF THE CHARLES IN CHARLES IN CHARLES IN CHARLES IN CONTROL OF THE CHARLES IN CONTROL OF THE CHARLES IN CHARLES IN CONTROL OF THE CHARLES IN CONTROL OF	<u>ent.</u>					
I hereby accept the appointment as registered agent and the provisions of all statutes relative to the proper and co						

Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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

MGR = Manager MGRM = Managing Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michael Simkins	301 West 41st Street Suite 406 Miami, FL 33140	✓ Add Remove
Member	Sea Level Properties, LLC	301 West 41st Street Suite 406 Miami, FL 33140	Add ☐ Remove
			Add Remove
D. If amendi	ing any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	_
			<del>_</del>
			_ _
Dated 0	25 2012	>	
		Debra L. St. Skynd or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00