000126573

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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C. LEWIS

DEC - 3 2012

EXAMINER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850), 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

RECEIVED 12 NOV 30 AM 10: 55

SEOPEIANT OF STATE TALLAHASSEE, FLORIDA

Management Miami	Florida LLC		·	
1st Debtor Steven M	Dill			
			Art of Inc. File	
			LTD Partnership File	
			Foreign Corp. File	
			L.C. File	
		ļ	Fictitious Name File	
			Trade/Service Mark	
		1	Merger File	
			Art. of Amend. File	
			RA Resignation	
			Dissolution / Withdrawal	
			Annual Report / Reinstatement	
			Cert. Copy	
			Photo Copy	
•			Certificate of Good Standing	
			Certificate of Status	
			Certificate of Fictitious Name	
			Corp Record Search	
	•		Officer Search	
			Fictitious Search	
Signature			Fictitious Owner Search	
			Vehicle Search	
	- 		Driving Record	
Requested by: SETH	11/30/12		UCC 1 or 3 File	
Name	Date	Time	UCC 11 Search	
			UCC 11 Retrieval	
Walk-In	Will Pick Up		Courier	
THE PROPERTY OF THE PROPERTY CAN BE	~			

COVER LETTER

TO: Registration Section
Division of Corporations

Surject, Management Miami Florida, 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:

Jonathan Teboul

Name of Person

Management Miami FL, LLC

Firm/Company

12000 Biscayne Blvd., Suite 106

Address

North Miami, FL 33181

City/State and Zip Code

jt@managementmiami.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jonathan Teboul

_305\305-5323

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fce

□\$30.00 Filing Fee & Certificate of Status

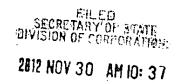
□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$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



Management Mlami Florida, L				
(Name of the Limited Lini (A Flor	bility Company as rida Limited Liabilit	t now appears on ou Company)	r records.)	***
The Articles of Organization for this Limited Liability Florida document number L12000126573	ity Company were	filed on October	3, 2012	and assigned
This amendment is submitted to amend the following	ng;			
A. If amending name, enter the new name of the	e limited liability c	ompany here:		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Li	ibility Company," the	designation "LLC"	or the abbreviation
Enter new principal offices address, if applicable)i			
(Principal office address MUST BE A STREET A	DDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	750			
B. If amending the registered agent and/or registered agent and/or the new registered office		ddress on our rec	eords, <u>enter the</u>	name of the new
Name of New Registered Agent:	<u>.</u>			
New Registered Office Address:				
THE TAGGISTON ONLY TUMESS.		Enter Flo	rida street address	•
			. Florida	
_	Cit	,		Zip Code
New Registered Agent's Signature, if changing Registered	stered Agent:			
I hereby accept the appointment as registered as the provisions of all statutes relative to the prop- accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	er and complete ped agent as provi ed agent as provi istered office addi	erformance of my l led for in Chapter	duties, and I am j 608, F.S. Or, if th	familiar with and his document is

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member - 2012 NOV 30 AM 10: 37

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Cedric C. Teboul	12000 Biscayne Blvd.	Add
		Suite 106	Remove
		North Miami, FL 33181	
			Add
			Remove
			Add
		,	Remove
		<u> </u>	
			Add
	·		Remove
			Add
			Remove
			_
			Add
			Remove

D. If	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	ISION OF C	Y OF STATE ORFORATION
	201	<u>2 N</u> OV 30	AM IO: 37
		· · ·	
			
D-4- J	11/30/212	_	
Dated	The state of the s		
	Signature of a member or authorized representative of a member		
	Jonathan Teboul		
	Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00