L13000010345

(Reque	estor's Name)	
(Addre	ess)	
(Addre	ss)	
(City/S	itate/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busin	ess Entity Nar	ne)
(Доси	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	

Office Use Only

B. KOHR



000244203330

02/04/13--01043--011 **25.00



COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Fisherman Hol. Name of Limit	ed Liability Company	<u> </u>
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	·
Please return all correspon	dence concerning this matter	to the following:	·
	Craid	Packer Name of Person Mace + Packer PL Firm/Company	
	_	Name of Person	
	Wa	Mace + Packer PL	FERR
		Firm/Company	
	14201	W. Sunrise Blud. =	# 203
		Address	70
	Sunri	City/State and Zip Code Ker@ firm titkcorp be used for future annual report notificati	PH III
		City/State and Zip Code	2
	E-mail address: (to	be used for future annual report notificati	on)
For further information co	ncerning this matter, please ca		
Craig Fo	ac Ver Person	at (954) 236-049 Area Code & Daytime Te	2 lephone Number
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	□\$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

Fisherma	an Holdings, L	
(Name of the Limited Liabil (A Florid	lity Company as it now appear la Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability	y Company were filed on	1 00 0013 Fand assigned
Florida document number	<u>5</u> .	THE TE
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	imited liability company here	:
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Compar	ny," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	 	
B. If amending the registered agent and/or regregistered agent and/or the new registered office ac		ur records, enter the name of the new
Name of New Registered Agent:		-
New Registered Office Address:		
	Ent	er 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 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 Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Oren Itilel	Parbox 3350 N. 35	St. Add
		Hollywood, FL 33021	Remove
	•		
 			Add
			Remove
			—
			L Add
			Remove
			Add
·		·	Remove
			_
			
			Remove
			_
			Add
			Remove

amending any	other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
	
<u></u> .	
Janua	ry 28, 2013.
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Tamar Fisherman
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00