Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ACCOUNTANT & MANAGEMENT INC

Account Number : 120110000070

: (305)541-3980

Phone Fax Number

: (305)541-7033

Enter the email address for this business entity to be used for future .. annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FLOREN LLC

Cortificate of Status Certified Copy Û Page Count 04 Estimated Charge \$25.00

H13000209077 3 COVER LETTER

TO:

Registration Section
Division of Corporations

SUPERCY.

FLOREN 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:

MOSES NAE

Name of Person

ACCOUNTANT & MANAGEMENT INC

Firm/Company

1549 NE 123RD ST

Address

NORTH MIAMI, FL 33161

City/State and Zip Code

INFO@TAXLEAF.COM

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

For further information concerning this matter, please call:

MOSES NAE

_{4,7}305,541-3980

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

S25.00 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

H13000209077 3 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TASE

FLOREN LLC			SER
· · _ · · - 	ty Company as it now appears on Limited Liability Company)	our records.)	100
(A Florida	Limited Liability Company)		5 SERV
The Articles of Organization for this Limited Liability	Company were filed on 01/25/2	2013 and	assigned T
Florida document number L13000013406			- 95
Torida document flamoer	 -'		T: 10
This amendment is submitted to amend the following:			_
A. If amending name, enter the new name of the lin	nited liability company here:		
The new name must be distinguishable and end with the will.L.C."	ords "Limited Liability Company,"	the designation "LLC" or t	the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
.			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regi	istered office address on our	records, enter the pair	ne of the nev
registered agent and/or the new registered office ad			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter f	lorida 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

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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	KARPEL INTERNATIONAL LIMITED	1549 NE 123RD ST	🗹 Add
		NORTH MIAMI, FL 3316	1 Remove
MGR	MARKOWIECKI, EDUARDO D	1549 NE 123RD ST	Add
		NORTH MIAMI, FL 3316	Remove
MGR	MARKOWIECKI, HORACIO C	1549 NE 123RD ST	
		NORTH MIAMI, FL 33161	Remove
			Add
			Remove
<u>. </u>			TALLAHAM TALLAHAM TALLAHAM TALLAHAM
			SEE. FLORIDA
			Remove

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If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	ATTIMED ATTILL AND
ted SEF	PTEMBER 17TH 2013
	AUU MUA
	Signature of a memberior authorized representative of a member
	EDUARDO D MARKOWIECKI
	Typed or printed name of signer

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