L130000024067

(Requestor's Name)					
(Address)					
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(Bu	siness Entity Name)			
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(Do	ocument Number)				
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THE LEG

C. LEWIS

JUN 2 5 2013

EXAMINER



COVER LETTER

TO: Registration Section Division of Corps					
BIKI	PY PRODUCTIES IV.				
SUBJECT:	Name of Limited Liability Company				
The enclosed Articles of An	nendment and fee(s) are submitted for filing,				
Please return all correspondence concerning this matter to the following:					
	ONE 610BAL PROPERTY MANAGEMENT Name of Person				
	Name of Person				
	Firm/Company				
	11804 E HALLANDALE BEACH BIND Address				
	Address				
	HALLANDALE II 33009. City/State and Zip Code JORGE D MOVM! Ke pon. Com E-mail address: (to be used for future annual report notification)				
	City/State and Zip Code				
ORVED mornike poor com					
For further information con	cerning this matter, please call:				
JORGE HUPF	erson at (766) 306 7308 Area Code & Dayrime Telephone Number				
Name of P	erson Area Code & Daytime Telephone Number				
Enclosed is a check for the	following amount:				
☐ \$25.00 Filing Fee	□\$30.00 Filing Fee & □\$55.00 Filing Fee & □\$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

24;		ED		
JUN	24	PM	Э.	~-

Bikey Properti	SECRETARY OF STATE
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	v as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company	were filed on $2-13-13$ and assigned
Florida document number <u>L13000024067</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and end with the words "Limite"L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
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 offi registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter 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, entertine the same, and address of each Manager or Managing Member being added or removed from our records: JUN 24 PN 3:58 MGR = Manager SECRETARY OF STATE MGRM = Managing Member TALLAHASSEE, FLORIDA Type of Action **Title** Name 1180 E Hallandale Beach Blvd MGR Ricardo Bialystocki Suite A Hallandale, FL, 33009 1180 E Hallandale Beach Blvd MGR Patricia lardelevsky Remove Suite A Hallandale, FL, 33009 Remove Remove

FILED

13 JUN 24 PM 3 58

SECRETARY OF STATE

D. If amending any other information, enter change(s) here: (Attach additional sheets of MASSER) FLORIDA Karen Lijtenstein: Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00