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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	; #)
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(Do	ocument Number)	
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SECRETARY OF SIME

B. BOSTICK
MAY - 6 2013
EXAMINER

COVER LETTER

•	COVER LETTER
TO: Registration So Division of Cou	
SUBJECT: RO12	245 LLC
50D0D011	Name of Limited Liability Company
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspo	ondence concerning this matter to the following:
	Halali Eli Eyal
	Name of Person
	Firm/Company
	PO BOX 4175
	Address
	Fort Lauderdale FL 33338
	City/State and Zip Code
	miginvestmentsllc@hotmail.com
	E-mail address: (to be used for future annual report notification)
For further information	concerning this matter, please call:
Eli Halali	_{at} 954 6387034
	all I

Enclosed is a check for the following amount:

Name of Person

\$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:

Area Code & Daytime Telephone Number

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROI245 LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our recommitted Liability Company)	ords.)
The Articles of Organization for this Limited Liability Conference of Organization for this Limited Liability Conference of Conf	ompany were filed on 03/04/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Company," the desig	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	2013 SEC
Enter new mailing address, if applicable:		ASSEE
(Mailing address MAY BE A POST OFFICE BOX)		-
		2: 58
B. If amending the registered agent and/or registered agent and/or the new registered office address.		,
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida si	treet address
		orida
	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 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	MIAMI ISRAEL MANAGEMENTS LLC	PO BOX 4175	Add
		FORT LAUDERADLE, FL, 33338	Remove
MGR	HALALI, ELI EYAL	PO BOX 4174	
		FORT LAUDERADLE, FL, 33338	Remove
		CAR AR HIT S	# T
MGRM	ATIYA, SHAY	PO BOX 4175	Add Add
		FORT LAUDERADLE, FL, 33338	Remove
MGR	MIAMI ISRAEL MANAGEMENT LLC	PO BOX 4175	. 📝 Add
		FORT LAUDERADLE, FL, 33338	Remove
			Add
			. Remove
			Add
			Remove

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	4/29/2013
<u></u>	() ()
	Signature of a member or authorized representative of a member
	EYAL E HALALI Typed or printed name of signee
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF SILIF