

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H15000170224 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KATZ BASKIES LLC

Account Number : I20080000071 Phone

Fax Number

: (561)910-5700 : (561)910-5701

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VER-MAC PROPERTIES 440 LLC

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P. 002

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			COVER LETTER	
TO: Re	gistration Se vision of Cor	ection porations		
SUBJECT:	Ver-Mac Pr	roperties 440 L.J.C		
SUBJECT:		Name of Lim	ited Liability Company	
		Amendment and fec(s) are sub indence concerning this matter		
		Jeffrey A. Baskies		
			Name of Person	
		Katz Baskies LLC		
			Firm/Company	
		2255 Glades Road Suite 24	10W	
			Address	
		Boca Raton, FL 33431		
		jeffrey.baskies@katzbaskie: E-mail address: (City/State and Zip Code s.com to be used for future annual report notifi	cation)
For further i	information c	oncerning this matter, please c	all:	
Jeffrey A. E	Baskies		561 910-5700 at ()	
·	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	ne following amount		
\$25.00	Piling 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)
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassec, FL 323	ations ACR Control of the Circle SAR —

JUL/13/2015/MON 11:40 AM Katz Baskies LLC

FAX No. 561-910-5701

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ver-Mac Properties 440 LLC		
(Name of the Limited L (A F	iability Company as it now appears of lorida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liabil Florida document number £13000037317		013 and assigned
This amendment is submitted to amend the following		
A. If amending name, enter the new name of the	e limited liability company here	
The new name must be distinguishable and contain the words	"Limited Liability Company," the design	nation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable		
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
- · · · · · · · · · · · · · · · · · · ·		
<u>Mailing address MAY BE A POST OFFICE BOX</u>	<u> </u>	
registered agent and/or the new registered office Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office readings.	Enter Florida	street address
		Florida
_	City	, Florida
lew Registered Agent's Signature, if changing Regis	stered Agent:	
hereby accept the appointment as registered ago provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the regi	nd complete performance of my	duties, and Lam familiar with and
company has been notified in writing of this cha	stered office address, I hereby o	onfirm that the limited liability
company has been notified in writing of this cha	stered office address, I hereby o	Siguature of New Registered Appli
ompany has been notified in writing of this cha	stered office address, I hereby o	confirm that the limited liability

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FAX No. 561-910-5701

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Alan S Macken	17071 W Dixie Hwy	🗆 Add
		North Miami Beach, PL 33160	□ Remove
			■ Change
MGR	Andrew K Verzura	17071 W Dixie Hwy	
		North Miami Beach, FL 33160	■ Remove
			Change
			□ Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
		1388 AAY 3833	Change
		FLOR	□ Rimove C:: □ Change
		Om	Change

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D. If amending any other	r information, enter change(s)	here: (Attach additional she	eis, if necessary.)	

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E. Effective date, if other	than the date of filing:	vior to date of filing or more than f	(optional)	wat to 605 0207 (3)/b)
(cr ani criatili a data in finto), ti	I in this block does not meet the app	plicable statutory filing require	ments, this date will no	t be listed as the
Note: If the date inserted	on the Department of State's reco	1 US.		•
Note: If the date inserted document's effective date				AL.
Note: If the date inserted document's effective date	delayed effective date, but	not an effective time, at	: 12:01 a.m. on the	্র e earlier of:
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Note: If the date inserted document's effective date If the record specifies a (b) The 90th day after	Signature of a momber or a	nithorized representative of a mem		
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Note: If the date inserted document's effective date If the record specifies a (b) The 90th day after Dated July 13	Signature of a member or a	nithorized representative of a mem	ber 23	e earlier of: