

L13000045944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

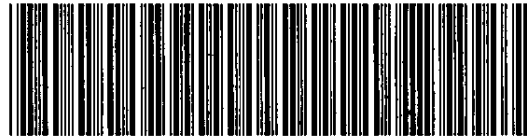
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAY 10 P 12:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 12 2016

SWABSON

LAW OFFICES
Green & Piotrkowski, PLLC

A Professional Limited Liability Company

317 SEVENTY-FIRST STREET
MIAMI BEACH, FLORIDA 33141

Marvin M. Green (Deceased)
Jeffrey R. Hall
Joel S. Piotrkowski

E-MAIL: joel@gkppa.com

OFFICE: (305) 865-4311
FACSIMILE: (305) 861-8813

May 5, 2016

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: NB Abbott, LLC
Document No. L13000045944

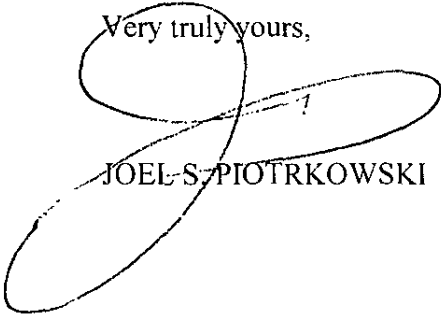
Gentlemen:

Enclosed herewith is Articles of Amendment to Articles of Organization of NB Abbott, LLC and check in the amount of \$25.000 for the filing fee.

Also enclosed is our check in the amount of \$35.00 for a certified copy of the Articles of Organization and a Certificate of Status for NB Abbott, LLC.

Your prompt attention to this matter is appreciated.

Very truly yours,



JOEL S. PIOTRKOWSKI

JSP:ss
Enclosures

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

NB ABBOTT, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on March 28, 2013 and assigned
Florida document number L13000045944.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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 office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

, Florida

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 605, 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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JUN 10 12:39
CLERK OF STATE
TREASURY
FLORIDA

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Yariv Lerner		☐ Add
		PO Box 414318, Miami Beach, FL 33141	☒ Remove
			☐ Change
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			☐ Change

2018 MAY 10 PM 12:39
 SECRETARY OF STATE
 FLORIDA

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Typed or printed name of signee

Filing Fee: \$25.00

FILED
2016 MAR 10 PM 12:39
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA