## L13000061928

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	<u> </u>
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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06/20/16--01015--014 \*\*25.00

FILED

MICRETARY OF STATE

NECKTIARY OF STATE

**S Warren**JUL 0 5 2016



June 21, 2016

JOSEPH P MULLEN 2929 E COMMERICIAL BLVD PH-C FORT LAUDERDALE, FL 33316

SUBJECT: 133ROI LLC Ref. Number: L13000061928

We have received your document for 133ROI LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 816A00013059

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

Divi	ision of Corpo	orations		
SUBJECT:	133 ROI LLC			
SOBOLC I.		Name of Limit	ed Liability Company	
The enclosed	Articles of A	mendment and fee(s) are subm	nitted for filing.	
Please return	all correspond	lence concerning this matter to	o the following:	
		JOSEPH P.MULLEN, AGE	ENT	
			Name of Person	
		MULLEN & BIZZARRO.	P.A	
			Firm/Company	
		2929 E. COMMERICIAL E	BLVD, PH-C	
			Address	<del></del>
		FORT LAUDERDALE, FL	. 33316	
			City/State and Zip Code	
		JPMULLEN@MULLENBIZ		
		E-mail address: (to	o be used for future annual report notifica	tion)
For further in	nformation cor	cerning this matter, please cal	11:	
JOSEPH P.			954 772-9100 at ()	
	Name of I	Person	Area Code Daytime To	elephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	iling 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:

TO:

**Registration Section** 

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** 

( <u>Name of the Limited Lia</u> (A Flo	ability Company orida Limited Lial	as it now a bility Comp	рреа апу)	rs on our record	1.0RII	D 36 STATE		
The Articles of Organization for this Limited Liability Florida document number L13000061928	ty Company we	ere filed o	on <u>4/2</u>	29/2013	<b>7</b> ?	P	ssigned	<del>س</del> امهای بر
This amendment is submitted to amend the following	g:							
A. If amending name, enter the new name of the	<u>limited liabilit</u>	y compa	ny ho	ere:				
The new name must be distinguishable and contain the words "	'Limited Liability	Company,'	the d	lesignation "LLC	C" or the a	abbreviation "	L.L.C."	<del></del>
Enter new principal offices address, if applicable:	•	3075 W O	AKL	AND PARK E	BLVD. #2	200		
(Principal office address MUST BE A STREET AL	ODRESS)	FORT LA	UDE	RDALE, FL 3	3311			_
	-	···				<del></del>		<del></del>
Enter new mailing address, if applicable:	į	P.O. BOX	4175	;				
Mailing address MAY BE A POST OFFICE BOX	2	FORT LA	UDE	RDALE, FL 3	3338			_
	-							
B. If amending the registered agent and/or registered agent and/or the new registered office a		e addres	ss on	our record	s, <u>enter</u>	r the name	e of the	new
Name of New Registered Agent: SN	NS REAL ESTA	TE MAN	AGE	MENT, LLC				
New Registered Office Address:	XXXXXXXXXXX			Oakland rida street addre:		Blvd.,	#200	

## New Registered Agent's Signature, if changing Registered Agent:

133ROI LLC

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.

FORT LAUDERDALE.

City

SNS REAL ESTATE MANAGEMENT LLC

If Changing Registered Agent, Signature of New Registered Agent

Florida 33.333XX

33311

Zip Code

BY: NOAM HANOCH AVRAHAMI, a member

Page 1 of 3

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>	Name	Address	Type of Action
			□ Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			Change
MGR	M.I.M real estate management lic	601 W OAKLAND PARK BLVD:	Add
		OAKLAND PARK, FL. US 33311	■ Remove
			Change
MGR	SNS real estate management llc	3075 W OAKLAND PARK BLVD  ■	Add
		#200	□ Remove
		FORT LAUDERDALE, FL 33311	Change
			Add
			Remove
			□'Change
		OF STATE F. FLORIDA	P □ Remove
			Change

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an e <u>ote</u>	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of each day after the record is filed.
iteo	June 17, 2016.
	July P. Muller Signature of a member or authorized representative of a member
	Joseph P. Mullen legal counted!
	TST A G
	Page 3 of 3

Filing Fee: \$25.00