

15-Oct-2014 10:48

Snyder-Groisman P.A.

Fax: +1 850 337899

p.1

10/15/2014

L13000081399

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000241753 3)))



H140002417533ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : SNYDER GROISMAN P.A.
Account Number : I20120000060
Phone : (786)899-2888
Fax Number : (786)899-2898

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

Email Address: JENNIFER@SNYDERGROISMAN.COM

RECEIVED

14 OCT 15 PM 12:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SHEMAI LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

OCT 16 2014

1 CLIN

Electronic Filing Menu

Corporate Filing Menu

Help

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

#14000241753

SHEMAI 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 June 5, 2013 and assigned Florida document number L13000081399

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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:

Snyder Groisman P.A.

New Registered Office Address:

21500 Biscayne Blvd., Suite #401

Enter Florida street address

Aventura

Florida 33180

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 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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

#140002417533

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

#140002417533

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Elias Sabbagh	3400 NE 192nd Street, Apt. 705	<input type="checkbox"/> Add
		Aventura, FL 33180	<input checked="" type="checkbox"/> Remove
MGR	Mariano Weil	3400 NE 192nd Street, Apt. 705	<input checked="" type="checkbox"/> Add
		Aventura, FL 33180	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
OCT 15 2014

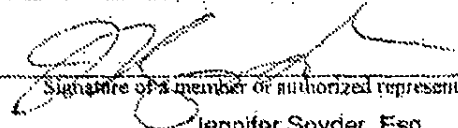
#140002417533

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

#14000241753

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated October 15, 2014



Signature of a member or authorized representative of a member
Jennifer Snyder, Esq.

Typed or printed name of signer

2014 OCT 15 PM 8:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

#14000241753