13666105998

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dunianae Fabita Nama)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200250222922

08/01/13--01008--001 **25.00

AUG - 2 2013 T CLINE

COVER LETTER

TO: Registration Sect Division of Corpo					
SUBJECT:	Name of Limite	hlake Dr. LLC ed Liability Company			
The enclosed Articles of A	mendment and fec(s) are subr	nitted for filing.			
Please return all correspond	dence concerning this matter t	to the following:			
	D, SEC	M - GODICIU Name of Person			
		Firm/Company			
	1106 N	E 8th St			
	· ·	Address			
	Halla	udale FL 33009	ı	7. ~	
	dsecuse	Address Add	<i>U</i> ,	BECRETALIANA	1
For further information cor	neerning this matter, please ca		,		
	ue bodivid		-22_ ephone Number	2013 ÅUG - 1 PH 1: 01 SECRETARY DE STATE ALLAHASSEE FLORIBA	C
Enclosed is a check for the	following amount:				
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Certificate o Certified Co (additional o	of Status &)

MAILING ADDRESS:

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

1005 N Southla	ake Drive, LLC
(<u>Name of the Limited Liabilit</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability (Florida document number	Company were filed on 7/26/13 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin ABY PROPERTIES, LLC	^
The new name must be distinguishable and end with the we "L.L.C."	words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	DRESS) Hollywood FC 3302 5 1
(Principal office address MUST BE A STREET ADD	DRESS) Hollywood FL 330ER & TI
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1106 NE 8th Street To Hallandale FL 330059
B. If amending the registered agent and/or registered agent and/or the new registered office ad	gistered office address on our records, <u>enter the name of the new ddress here</u> :
Name of New Registered Agent:	D, SECU-GODICIU
New Registered Office Address:	1106 NE 8th Street
	D, SECU-GODICIU 1106 NE 8th Street Enter Florida street address Hallandale, Florida Zip Code
	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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Title Type of Action **Name Address** D. SECU-GODICIU 1106 NE 8th Street JAdd

Hallandale FL 33009 Remove MGR 1106 NE 8th Street Add MGRM DISECU Hallandale FL 33509 Remove Remove Remove

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated _	7/29, 2013.
	DS Godish
	Signature of a member or authorized representative of a member
	Daniela Secu Godin
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE

でにけて