

Division of Corporations

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L13000108080
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : THE ALHADEFF LAW GROUP, P.L.
 Account Number : 120130000097
 Phone : (786)618-9703
 Fax Number : (786)350-1826

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BANCROFT OCEANS FIVE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
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MAY 21 2014
J. HARRIS

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COVER LETTER

TO: Registration Section
Division of Corporations

(((H14000119563 3)))

SUBJECT: Bancroft Oceans Five, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Almadoff
Name of Person

The Almadoff Law Group, P.L.
Firm/Company

3050 Biscayne Blvd, PH 1
Address

Miami, FL 33137
City/State and Zip Code

mark@almadofflaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Almadoff at 786 618-9703
Name of Person Area Code Daytime Telephone Number

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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bancroft Oceans Five 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 7/31/13 and assigned Florida document number L130000108080

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 "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)

14 MAY 20 PM 12:33 DIVISION OF CORPORATE AFFAIRS

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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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:

MGR = Manager
AMBR = Authorized Member

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Title	Name	Address	Type of Action
AMBR	Dorcross Partners, Ltd.	2200 BISCAYNE BLVD	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33137	<input type="checkbox"/> Remove
AMBR	Cox Ocean, LLC	3050 AVENTURA BLVD,	<input checked="" type="checkbox"/> Add
		3RD FL	<input type="checkbox"/> Remove
		AVENTURA, FL 33180	
AMBR	Zeinal Miami Beach, LLC	1501 COLLINS AVE 207	<input checked="" type="checkbox"/> Add
		MIAMI BEACH, FL 33139	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/>
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

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 5/20, 2014



Signature of a member of authorized representative of a member

Mark Alhadeff *attorney-in-fact*

Typed or printed name of signee

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FLORIDA
 SECRETARY OF STATE
 DIVISION OF CORPORATE AFFAIRS
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