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B. BOSTICK

SEP 1 8 2013

EXAMINER

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

INFINITY HIGHLAND ARMS, 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:

Isaac Benmergui

Name of Person

law offices of Isaac Benmergui

Firm/Company

1150 Kane Concourse, Second Floor

Address

Bay Harbor Islands, Florida 33154

City/State and Zip Code

gaonlaw@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Isaac Benmergui

305₃97-8547

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INFINITY HIGHLAND ARMS, 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 Comp. Florida document number L13000108231	and assigned		
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 "L.L.C."	'Limited Liability Company," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable:		-1 2	
(Principal office address MUST BE A STREET ADDRES.	(S)		
		10000000000000000000000000000000000000	
		J P	
Enter new mailing address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		្ត ហ្គ	
		2	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		r the name of the new	
Name of New Registered Agent:	····		
New Registered Office Address:			
	Enter Florida street d	et address	
	. Florida		
	City	Zip Code	
New Degistered Agent's Signature if shanging Degistered Ag	ment.		

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Dan Goldfarb	12000 Biscayne Boulevar	d 📝 Add
		Unit 407	Remove
		North miami Beach, Florida 3318	1
			Add
			Remove
			Add
		TALLAH.	Remove
		ASSEE, FI, OF TO	Add
		<u></u>	
			Add
		·	Remove
			Add
			Remove

D.	If amend	ling any	other information, enter change(s) here: (Attach additional sheets, if necessary.)
Da	nted		TAAA.
			Signature of a member or authorized representative of a member
			Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

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