

# L13000108999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

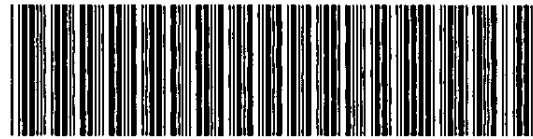
(Business Entity Name)

(Document Number)

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08/09/13--01014--023 \*\*25.00

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FILED  
13 AUG 29 PM 2:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER

SEP 03 2013



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 12, 2013

SERBER & ASSOCIATES, P.A.  
DANIEL J SERBER  
2875 NE 191ST STREET, STE. 801  
AVENTURA, FL 33180

SUBJECT: MANMAX SLS, LLC  
Ref. Number: L13000108999

We have received your document for MANMAX SLS, 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):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly  
Regulatory Specialist II

Letter Number: 813A00019251

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: MANMAX SLS, 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:

**Daniel J. Serber**

Name of Person

**Serber & Associates, P.A.**

Firm/Company

**2875 NE 191st Street, Suite 801**

Address

**Aventura, FL 33180**

City/State and Zip Code

**info@serberlawfirm.com**

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

For further information concerning this matter, please call:

**Danilo Jimenez**

Name of Person

**305 932-6262**

at ( )

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**

FILED  
13 AUG 29 PM 2:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**MANMAX SLS, 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 08/01/2013 and assigned Florida document number L13000108999

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

MANMAX MC, LLC

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)

19495 BISCAYNE BLVD, SUITE 400

AVENTURA, FL 33180

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

19495 BISCAYNE BLVD, SUITE 400

AVENTURA, FL 33180

**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:

Daniel J. Serber

New Registered Office Address:

2875 NE 191st Street, Suite 801

*Enter Florida street address*

Aventura

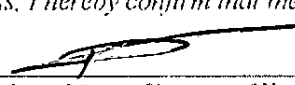
Florida 33180

*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 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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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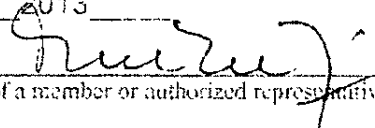
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Dated August 06<sup>th</sup>, 2013

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Victoria Tardioli – Authorized representative of the members, \_\_\_\_  
Typed or printed name of signer