Electronic Filing Cover Sheet

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(((H13000184807 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name ; GILMAN CIOCIA INC.

Account Number : I20120000051

Phone : (305) 937-7773

Fax Number : (815) 301-2897

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

S&YUNOUR' LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

-INSTRUCTIONAL TECHNOLOGY SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

K. SALY EXAMINER

AUG 2 1 2013

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#### COVER LETTER

TO:

Registration Section
Division of Corporations

SHRIECT

S & Y Group 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 Bengio** 

Name of Person

Gilman & Ciocia

Firm/Company

2875 NE 191st Street Suite 601

Addres

Aventura, FL 33180

City/State and Zip Code

daniel.bengio@gtax.com

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

For further information concerning this matter, please call:

Daniel Bengio

,305 **,692520**4

Name of Person

Arca Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

☐\$30.00 Filing For & Certificate of Status

Q\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fcc, 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 Bullding
2661 Executive Center Circle
Tallahassee, FL 32301

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#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

13 AUS 20 AM 10: 12

SEUNE LARY OF STATE
ALLAHASSEE, FLORIDA

S & Y Group LLC		
(Name of the Limited Liab) (A Flori	lity Company as it now appears de Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability	y Company were filed on Aug	ust 5, 2013 and assigned
L13000110390	)	
This amendment is submitted to amend the following	•	
A. If amending name, enter the new name of the l	mited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or represented agent and/or the new registered office a		r records, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter	Florida street address
		Florida
<u></u>	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

Page 1 of 3

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## H130001848073

MGR = Manager

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:

MGRM = Managing Member <u>Title</u> Name Address Type of Action **MGRM** Shirley Slotwiner 20191 E Country Club Drive \_ **V**dd TH 5 Remove Aventura, FL 33180 Jonathan J Slotwiner 20191 E Country Club Drive **MGRM** TH 5 Remove Aventura, FL 33180

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D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
•	
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	0040
Dated A	ugust 20 2013
	Signature of a member of authorized representative of a member
	Shlomo Slotwiner, Managing Member
	Typed or printed name of signee

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Filing Fee: \$25.00