113000116110

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COVER LETTER

то:	Registration Se Division of Cor			
enan		OLDING LLC		
SUBJE	CT:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		ADAM DROR		
			Name of Person	
			Firm/Company	
		1423 SE 10TH STREET, S	SUITE I	
		CAPE CORAL, FL 33990	Address	
		drorađam01@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report not	ification)
For fur	ther information e	oncerning this matter, please ca	afl:	
KEDE	MILAN		239 573-8667	
	Name o	t'Person	at () Area Code Daytin	ne Telephone Number
Enclos	ed is a check for th	ne following amount:		
≡ \$2:	5.00 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)
	Registi	ING ADDRESS: ation Section	STREET/COUR Registration Section	on

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Business of the State of the St

(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 $\frac{08/16/2013}{}$ and assigned Florida document number L13000116110 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 contain 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) 17830 ENGLE ROAD, UNIT 14 Enter new mailing address, if applicable: MIDDLEBURG HEIGHTS, OH 44130 (Mailing address MAY BE A POST OFFICE BOX) 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

New Registered Agent's Signature, if changing Registered Agent:

BERES HOLDING LLC

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	GEORGE NAKHLE	17830 ENGLE ROAD, UNIT 14 MIDDLEBURG HEIGHTS OH 44 130	= Add
			Remove
			□ Change
MGRM	ADAM DROR	1423 SE 10TH STREET CAPE CORAL, FL 33990	■ Add
		****	Remove
			Change
			Remove
			Change
	181 <u> </u>		□ Add
			Aemove
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			Add
			□ Remove
			Change

			
			
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(If an effective date is listed, the date mu Note: If the date inserted in this h document's effective date on the L	lock does not meet the applicable s	optional) of filing or more than 90 days after filing.) Pursuant attutory filing requirements, this date will not l	to 605.0207 (3)(1 be listed as the
the record specifies a delaye		effective time, at 12:01 a.m. on the	earlier of:
Dated	2018		
Dated			
	Signature of a member or authorized		

Page 3 of 3

Typed or printed name of signce

Filing Fee: \$25.00