# L17000122658

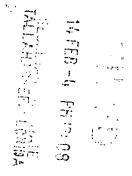
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J. Stavers FEB 0 5 2013

LAW OFFICES OF

# CHEPENIK | TRUSHIN LLP

Bart H. Chepenik, J.D., LL.M. Bradley H. Trushin, J.D. Stacy B. Rubel, J.D. 12550 Biscayne Boulevard, Suite 904 North Miami, Florida 33181

> Email: seslalt@ctllp.com Tele: 305.981.8889 eFax: 305.405.7979 www.ctllp.com

Daniel F. Bachman, J.D. Sergio M. Eslatt, J.D. Ryan C. Grubich, J.D. R. Dale Noll, J.D.

February 3, 2014

#### **VIA OVERNIGHT FEDEX**

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

Re: Bath Crest of Florida LLC- Articles of Amendment

To whom it may concern:

Enclosed please find the Articles of Amendment to the Articles of Organization for Bath Crest of Florida LLC, along with a check in the amount of \$25.00 for the filing fee.

If you have any questions or comments regarding this correspondence, please do not hesitate to contact me in the office.

Very truly yours,

/s/ SERGIO M. ESLAIT For the Firm

SME/df Enclosure

# **COVER LETTER**

TO: Registration Second Division of Corp					
SUBJECT: Bath (	Crest of Florid	a LLC			
SUBJECT:		ited Liability Company			
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.			
Please return all correspon	dence concerning this matter	to the following:			
	Sergio M. Es	slait			
		Name of Person			
	Chepenik Tr	ushin LLP			
		Firm/Company			
	12550 Bisca	yne Blvd.,#	904		
		Address			
	North Miami	, Florida 331	81		
		City/State and Zip Code		; , •	
	seslait@ctllp.com			$\mathbb{Z}_{\mathbb{X}}$	1
	E-mail address: (	to be used for future annual re	port notification)	5	והלים. האבר האבר
For further information co	ncerning this matter, please co	all:		in i	<u>ت</u> ت
Sergio M. E	slait	<sub>at</sub> 305 <sub>,</sub> 98	31-8889		 T
Name of	Person	Area Code	Daytime Telephone Number	Section 1998	;; ; ;
Enclosed is a check for the	e following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	□ \$60.00 Fit	ling Fee, te of Status &	<b>~</b>

#### MAILING ADDRESS:

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

### STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

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

(additional copy is enclosed)

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bath Crest of Florida LLC						
( <u>Name of the Limited Liabi</u> (A Flori	ility Company a da Limited Liabi	s it now appears lity Company)	on our records.	1		
The Articles of Organization for this Limited Liability Florida document number L13000122658					ıd assigı	ned
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the lin	mited liabil <u>ity</u>	company he	<u>re</u> :			
The new name must be distinguishable and end with the words "I	Limited Liability	Company," the o	designation "LLC"	or the abbrevia	tion "L.L	"C."
Enter new principal offices address, if applicable:	_					
(Principal office address MUST BE A STREET ADL	ORESS)					
	_					
				32* in	ed ed	*
Enter new mailing address, if applicable:				<u> </u>	1	,
(Mailing address MAY BE A POST OFFICE BOX)	_			<u> </u>		, <del>1</del> 1
				710	3	* 275
		•		20 C	ာ	1,411
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	,	address on	our records,	enter the n	ame of	the nev
Name of New Registered Agent:		<del></del>		<del></del> -		
New Registered Office Address:						
		Enter Flor	ida street address			
			, Flor			
		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 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

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 **Type of Action** <u>Name</u> <u>Address</u> <u>Title</u> 1069 NE 204 Terrace Theodore M. Karp MGR **■** Add Miami, Florida 33179 ☐ Remove □ Add ☐ Remove \_□ Remove □ Add □ Remove

D.	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
		<u> </u>	
		<del></del>	
E.	Effective date, if other than the date of filing:  The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than the date this document is filed by the Florida Department of State)	_ (optional) 90 days after	
	Dated February 3, 2014.		
	Signature of a member or authorized representative of a member	r	
	Fernand Labelle, President of Flabelle, Inc.		
	Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00