# 113000131946

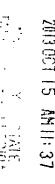
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J. SAULSBERRY EXAMINER

OCT 15 2013

### **COVER LETTER**

TO: Reg

Registration Section Division of Corporations

SUBJECT

Kaufman, Levene, Russo, 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:

# Erwin Kaufman

Name of Person

Kaufman, Levene, Russo, LLC

Firm/Company

1200 North Federal Highway, #201

Address

Boca Raton, Florida 33432

City/State and Zip Code ·

erwinlkaufman@gmail.com

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

For further information concerning this matter, please call:

# Erwin Kaufman

<sub>31,</sub>954 \**270-451**9

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

Kaufman, Levene, Russo, LLC		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Comparting Florida document number L13000131946	ny were filed on <u>9/18/2013</u>	and assigned
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and end with the words "Li "L.L.C."	mited Liability Company," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:		2813
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
Enter new mailing address, if applicable:		
		- E. w
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	drass
	Litter 1 tortau street au	W/ C00
		Zip Code
	C111	DID COULD

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>	Name	Address	Type of Action
President	Erwin Kaufman	1200 North Federal Highway, Suite 201, Boca Raton, Fi 33432	<b>✓</b> Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove 2013
			Control Remove
			Remove $\omega$

D. If amending any other informati	ion, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
October 10	<u>2013</u> .
	Erwin Kaufman
Sign	ature of a member of authorized representative of a member
	ERWIN KAUFMAN Typed or printed name of signee
	Page 3 of 3

2013 OCT 15 AM 11: 37

Filing Fee: \$25.00