# 13000135845

| (Re                                     | questor's Name)    |             |
|-----------------------------------------|--------------------|-------------|
| (Ad                                     | dress)             |             |
| (Ad                                     | dress)             |             |
| (Cit                                    | ry/State/Zip/Phone | e #)        |
| PICK-UP                                 | ☐ WAIT             | MAIL        |
| (Bu                                     | siness Entity Nar  | me)         |
| (Document Number)                       |                    |             |
| Certified Copies                        | _ Certificates     | s of Status |
| Special Instructions to Filing Officer: |                    |             |
| 1                                       |                    | .           |
|                                         |                    |             |
|                                         |                    |             |
|                                         |                    |             |

Office Use Only



400253226584

10/30/13--01027--004 \*\*25.00

B. BOSTICK OCT 3 1 2013 EXAMINER

#### **COVER LETTER**

TO: Registration Section

Division of Corporations

## WATERSTONE CAPITAL LARGO, 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:

### RICHARD WASERSTEIN

Name of Person

Firm/Company

## 1124 KANE CONCOURSE

Address

## BAY HARBOR ISLANDS, FL 33154

City/State and Zip Code

WAS913@AOL.COM

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

For further information concerning this matter, please call:

## RICHARD WASERSTEIN

305,861-8000

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**

#### WATERSTONE CAPITAL LARGO LLC

(Name of the Limited Liability Company as it now appears on our records.)

| (A FIOI                                                                                        | ida Ellitted Elaolity Company)                       |                          |
|------------------------------------------------------------------------------------------------|------------------------------------------------------|--------------------------|
| The Articles of Organization for this Limited Liabili Florida document number L13000135845     | ty Company were filed on 9/26/2013                   | and assigned             |
| This amendment is submitted to amend the followin                                              | g:                                                   |                          |
| A. If amending name, enter the new name of the                                                 | limited 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 A.                                                  | DDRESS)                                              | 720                      |
|                                                                                                |                                                      | F 8 - 7 -                |
| Enter new mailing address, if applicable:                                                      |                                                      | T 30                     |
| (Mailing address MAY BE A POST OFFICE BOX                                                      | Q                                                    | TO P                     |
|                                                                                                |                                                      | 2:<br>0                  |
| B. If amending the registered agent and/or r registered agent and/or the new registered office |                                                      | ©                        |
| Name of New Registered Agent:                                                                  |                                                      |                          |
| New Registered Office Address:                                                                 |                                                      |                          |
|                                                                                                | Enter Florida street aa                              | ldress                   |
|                                                                                                | , Florida,                                           |                          |
|                                                                                                | City                                                 | Zip Code                 |

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>             | Type of Action      |
|--------------|-----------------------------------|----------------------------|---------------------|
| MGR          | RICHARD WASERSTEIN                | 1124 KANE CONCOURS         | EAdd                |
|              |                                   | BAY HARBOR ISLANDS, FL 331 | Remove              |
| MGRM         | 2003 W TRUST, LLC                 | 1124 KANE CONCOURS         | E Add               |
|              |                                   | BAY HARBOR ISLANDS, FL 331 | Remove              |
| MGR<br>——    | ADAR INVESTMENT & MANAGEMENT, LLC | 17070 COLLINS AVE, STE 25  | 56 √ <sub>Add</sub> |
|              |                                   | SUNNY ISLES BEACH, FL 3316 | Remove              |
| MGRM         | JAIMINI MEHTA                     | 1000 S POINTE DRIVE, #80   | 6 <b>✓</b> Add      |
|              |                                   | MIAMI BEACH, FL 3314       | Remove              |
|              |                                   |                            | Za ZaAdd            |
|              |                                   |                            | Remove              |
|              |                                   |                            | PH 2:Add            |
|              |                                   |                            | Remove              |

| If amending any other in | nformation, e | enter change(s) here: (Attach additional sheets, if necessary.) |
|--------------------------|---------------|-----------------------------------------------------------------|
|                          |               |                                                                 |
|                          |               |                                                                 |
|                          |               |                                                                 |
|                          |               |                                                                 |
| ted OCTOBER              | 20            | 2013 " ~ \ \                                                    |
|                          |               | Why will                                                        |
| DICHARD                  | •             | of a member or authorized representative of a member            |
| RICHARD                  | WASER         | Typed or printed name of signee                                 |

Page 3 of 3

Filing Fee: \$25.00

2013 OCT 30 PM 2: 00