

L13000153104 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

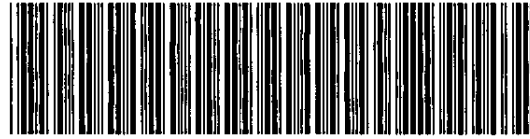
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11/25/13--01017--002 \*\*60.00

2013 NOV 25 PM 4:00  
FALLASSE, CLAUDIO

B. FOSTICK  
DEC - 2 2013  
EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: WYND28 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:

**Steven McNeff**

Name of Person

**Ben-Zion Group**

Firm/Company

**45 NE 41st Street**

Address

**Miami, FL 33137**

City/State and Zip Code

**Albany154@aol.com**

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

For further information concerning this matter, please call:

**Steven McNeff**

Name of Person

at ( **305** ) **456-1470**

Area Code & Daytime Telephone Number

RECEIVED  
TALLAHASSEE, FL  
2013 NOV 25 PM 4:00

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**

WYND28 LLC

(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 10/30/2013 and assigned Florida document number L13000153104.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

FILED	2013 NOV 25 PM 4:00
CLERK	
TALLAHASSEE, FLORIDA	

Enter new mailing address, if applicable:

(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*

\_\_\_\_\_, Florida \_\_\_\_\_

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

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>	<u>Type of Action</u>
MGR	Naima Group LLC	635 Euclid Avenue	<input checked="" type="checkbox"/> Add
		Apt 102	<input type="checkbox"/> Remove
		Miami Beach, FL 33139	
MGR	UCG28 LLC	45 NE 41st Street	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Miami, FL 33137	
MGR	AMIR BEN-ZION	45 NE 41st Street	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
		Miami, FL 33137	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FALL 2019 NO. 25  
 MASS. REG. COM.  
 11:44:00

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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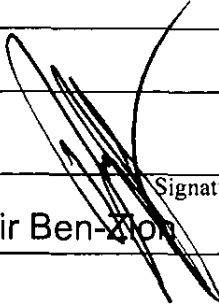
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Dated \_\_\_\_\_, \_\_\_\_\_.



Signature of a member or authorized representative of a member

Amir Ben-Zion

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 NOV 25 PM 4:00  
FALLAHS ST. 10000