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COVER LETTER

TO:		gistration Sect ision of Corpo			,	. (•	د د د		
0115.11	D.C.T.	Mizner on	the Green I	Developme	ent LLC	Ta .		~		
SUBJI	ECT:			Name of Limi	ted Liability	Company				
The en	closed	Articles of Ar	mendment and	fee(s) are subr	mitted for 1	īling.				
Please	return	all correspond	ence concernir	ig this matter t	to the follo	wing:		•		
			Arava Mo	har						
					Nam	e of Person				-
			Elad Natio	onal Prope	rties					
				7-1-1	Firm	/Company				-
			1000 S. P	ine Island	Road					
					A	ddress				-
			Plantation	, Florida 3	3324					
			oyair@elac	dnational.c		and Zip Code	e			-
			E-	mail address: (t	o be used fo	r future annua	al report	notification	on)	
For fur	rther in	nformation con	cerning this ma	atter, please ca	all:					
Osna	at Ya	ir			at (954 8	346-78	300		
	-	Name of P	erson			Area Code	Day	ytime Tel	ephone Numbe	r
Enclos	sed is a	check for the	following amo	unt:						
□ \$2	5.00 F	iling Fee	■ \$30.00 Filir Certificate	ng Fee & e of Status	Cen	00 Filing Fee tified Copy tional copy is e			Certified	ate of Status &

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**

Mizner on the Green Development LLC

(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company L13000156113 Florida document number	were filed on November 4, 2013	and ass	igned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
El-Ad Mizner on the Green Development LLC			
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or the a	abbreviation "L	L. C ."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		the name	of the n
registered agent and/or the new registered office address her	<u>c.</u>	∑ ∞ ਦ	
N. CN. P. C. LA			
Name of New Registered Agent:		<u>수요 (#2</u> 2011년	r -17/200
New Registered Office Address:		5 5	1
	Enter Florida street address		2.44
	, Florida		in the last
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	• •	1>	

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
Sec	Marc Shandler	1000 S. Pine Island Road, Suite 450	
		Plantation, Florida 33324	■ Remove
Sec	Arava Mohar	1000 S. Pine Island Road, Suite 450	
		Plantation, Florida 33324	□ Remove
			□ Add □ Remove
		Ä E H	□ Add
			5 3

 				
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l	ific, cannot be prior to date by the Florida Department	ific, cannot be prior to date of receipt or fi by the Florida Department of State) 2014	ific, cannot be prior to date of receipt or filed date and cate by the Florida Department of State) 2014	·

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