L13000157454

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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JEGGE BARY OF STATE
TALL AHASSEE, FLOREN

G. HARVEY

EXAMINER

TO: Registration S Division of Co					
	UCCESSFUL INVESTMENT	LLC			
SUBJECT:	Name of Lin	ited Liability Company			
The enclosed Articles of	`Amendment and fee(s) are sub	omitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	GRATSIANI , GIDEON	MG			
		Name of Person			
	BURD - SUCCESSFUL I	NVESTMENT LLC			
		Firm/Company			
	PO BOX 820				
		Address			
	HALLANDALE, FL 330	08		20) TA	
		City/State and Zip Code			
	DA@FST26.COM			2015 MAY 28 TALLAHASSI	******
		to be used for future annual report notifi	ication)	LLI ALC	1
For further information of	concerning this matter, please c	all:		PR F:	<u> </u>
DANIEL ARKUSH		954 393-1151 at ()		15 F. 0	ī.,.,
Name o	of Person	Area Code Daytime	Telephone Number	15°	
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e 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

BURD - SUCCESSFUL INVESTM	IENT LLC				
(Name of the Limit	ed Liability Compa (A Florida Limited I	ny as it now appears on our liability Company)	records.)		
The Articles of Organization for this Limited Li Florida document number L13000157454	ability Company	were filed on 11/08/2013		and assign	ed
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
The new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the designation	1 "LLC" or the ab	breviation "L.L.C	1 17
Enter new principal offices address, if applic		975 NORTH MIAMI BI			
(Principal office address MUST BE A STREE	T ADDRESS)	NORTH MIAMI BEAC	H , FL 33162		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	BOX)				
B. If amending the registered agent and/ registered agent and/or the new registered of	or registered o	ffice address on our re	ecords, <u>enter</u>	MY 2	the new
Name of New Registered Agent:				SEE, F	177
New Registered Office Address:	975 NORTH M	MIAMI BEACH BLVD #23 Enter Florida street		7 3	
	NORTH MIAN		, Florida _ ³³	[清] 〇	
		City	, Fiorida <u></u> _	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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u> <u>Name</u> <u>Address</u> Type of Action _ Add □ Remove ☐ Change □ Add □ Remove _□ Change □ Add NAYAS PE 4: OF _□ Add ☐ Remove ☐ Change _□ Add ☐ Remove ☐ Change

		
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		Acceptance of the second secon
		F: Common Sign
		700
		-
ffective date, if other than the	e date of filing:	(optional) or more than 90 days after filing.) Pursuant to 605.02
lote: If the date inserted in this bocument's effective date on the I	lock does not meet the applicable statutory f	filing requirements, this date will not be listed
e record specifies a delaye The 90th day after the re	d effective date, but not an effective cord is filed.	ve time, at 12:01 a.m. on the earlier
ated MAY 19	2015	

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Typed or printed name of signee

Filing Fee: \$25.00