

L14000011609

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(Business Entity Name)

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2019 FEB 21 A 11:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FEB 26 2019
11:11 AM

COVER LETTER

TO: **Registration Section**
Division of Corporations

S&S PEMBROKE PLAZA LLC

SUBJECT: _____
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:

MICHAEL SASONI JR.

Name of Person

Firm/Company

3763 CHURCHILL DOWNS DR

Address

DAVIE FL 33328

City/State and Zip Code

msasoni@aol.com

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

For further information concerning this matter, please call:

MICHAEL SASONI JR

954

465-0035

at (_____) _____

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**

FILED

2019 FEB 21 A 11:31

S&S PEMBROKE PLAZA LLC

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 2/4/2015 and assigned
Florida document number L14000011609.

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

Enter new principal offices address, if applicable:

6726-6780 PEMBROKE RD.

(Principal office address MUST BE A STREET ADDRESS)

PEMBROKE PINES, FL 33023

Enter new mailing address, if applicable:

100 E MCNAB RD

(Mailing address MAY BE A POST OFFICE BOX)

POMPANO BEACH, FL 33060

B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:

Name of New Registered Agent:

MICHAEL SASONI JR.

New Registered Office Address:

3763 CHURCHILL DOWNS DR.

Enter Florida street address

DAVIE

City

Florida 33328

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 or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MICHAEL SASONI	3201 NE 183 ST APT 306 AVENTURA FL	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated _____ .

Typed or printed name of signee