

L14000028045

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : GOLDEN ONYX LLC
Account Number : I201300000008
Phone : (954)272-8563
Fax Number : (888)308-9722

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: paz@paztax.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TS US TAX AND ACCOUNTING SERVICES LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$25.00 |

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FEB 21 2014

T. BROWN

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TS US TAX AND ACCOUNTING SERVICES 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:

Paz Shoham

Name of Person

TS US TAX AND ACCOUNTING SERVICES LLC

Firm/Company

1040 BISCAYNE BLVD APT 1403

Address

MIAMI, FL 33132

City/State and Zip Code

paz@paztax.com

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

For further information concerning this matter, please call:

Paz Shoham

Name of Person

954 272-8563

at ()
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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

TS US TAX AND ACCOUNTING SERVICES 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 02/19/2014 and assigned
Florida document number L14000028045

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)

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

City, Florida 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

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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:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------------|------------------------------------|--|
| <u>MGR</u> | <u>TURGEMAN, ROEY</u> | <u>1040 BISCAYNE BLVD APT 1403</u> | <input type="checkbox"/> Add |
| | | <u>MIAMI, FL 33132</u> | <input checked="" type="checkbox"/> Remove |
| <u>MGR</u> | <u>TURGEMAN, ROI</u> | <u>1040 BISCAYNE BLVD APT 1403</u> | <input checked="" type="checkbox"/> Add |
| | | <u>MIAMI, FL 33132</u> | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
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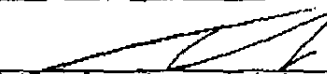
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Article III Other provisions, if any: ANY AND ALL LAWFUL BUSINESS. MEMBERS: PAZ SHOHAM; ITAY KLAZ

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated FEBRUARY 20, 2014



Signature of a member or authorized representative of a member

PAZ SHOHAM

Typed or printed name of signer

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Filing Fee: \$25.00

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