

From:

Division of Corporations

L14000049005

6/17/2014 10:18 AM P.001/004

Page 1 of 1

Florida Department of State
Division of Corporations
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To:

Division of Corporations
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From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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1100 WEST AVE 1602 LLC

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From:

06/17/2014 11:18

FILED 02/004

2014 JUN 17 AM 8:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

1100 WEST AVE 1602 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 03/25/2014 and assigned Florida document number L14000049005.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

1100 WEST AVE 1612 LLC

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:

C/O Ira D. Ganzfried

(Principal office address MUST BE A STREET ADDRESS)

251 5th Avenue, 4th FL

New York, NY 10016

Enter new mailing address, if applicable:

C/O Ira D. Ganzfried

(Mailing address MAY BE A POST OFFICE BOX)

251 5th Avenue, 4th FL

New York, NY 10016

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 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

From:

06/17/2014 11:18

#350 P.003/004

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

From:

06/17/2014 11:19

#350 P.004/004

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

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 June 17th, 2014

Signature of a member or authorized representative of a member

IRA D. GANZFRIED, AUTHORIZED BY MANAGING
 MEMBER
 ED12 ATEB

Typed or printed name of signer

Page 3 of 3

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