

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H140001207013)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number: I20010000062 : (323)962-8600 Phone

Fax Number : (323)962-3889

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BRYL DEVELOPMENT LLC

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MAY 22 2014

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Corporate Filing Menu

Help

COVER LETTER

TO: Registration S Division of Co				
BRYL D	Development LLC			
SUBJECT:	Name of Lim	Name of Limited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	Cheyenne Moseley			
		Name of Person	29	
	Legalzoom.com, Inc.			
		Firm/Company	7 N	
	100 W. Broadway Suite	100		
		Address		
	Glendale, CA 91210		2014 WAY 21 MATH: 43 SECULIARY OF STATE FALLAHASSEEL FLORES	
		City/State and Zip Code		
	doronbroman@gmail.com			
For further information	e-man address: (concerning this matter, please c	to be used for future annual report notifi	canony	
	concerning this matter, prease e		. 7050	
Imelda Vasquez		323 962-8600 ex		
Name	e 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)	
	LING ADDRESS: stration Section	STREET/COURIE Registration Section		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRYL Development 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 4/23/2014 and assigned Florida document number 1.14000065967 This amendment is submitted to amend the following:
TO THE TOTAL STATE OF THE TOTAL
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new pame must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"
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, <u>enter the name of the ne</u> 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 th

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Doron Broman	3330 NE 190 St., Apt. 2614	TO AN T
	·	Aventura, Florida 33180	Remove P
AMBR	Shimon Langbart	3330 NE 190 St., Apt. 2614	Add
		Aventura, Florida 33180	☑ Remove
AMBR	Broman Investments LLC	3330 NE 190 St., Apt. 2614	□ Add
		Aventura, Florida 33180	⊠ Remove
AMBR	SLRE Florida Investments LLC	3330 NE 190 St., Apt. 2614	Add
		Aventura, Florida 33180	A Remove
MGR	Doron Broman	3330 NE 190 St., Apt. 2614	☑ Add
		Aventura, Florida 33180	☐ Remove
MGR	Shimon Langbart	3330 NE 190 St., Apt. 2614	☑ Add
		Aventura, Florida 33180	Remove
		·	

D. If amer	ding any other infor	mation, enter change(s) here: (Attach additional sheets, if necessary.)	<u>-</u>		
_	- <u>-</u>		_		
			- -		
E. Effectiv	e date, if other than	the date of filing:(optional)	_		
(The effective date)	tive date must be specific.	cannot be prior to date of receipt or filed date and cannot be more than 90 days after be Florida Department of State)	, i 4 et ,	20	
Dated _	05/14	, 2014	是是	2014 景本Y	77
		Signature of a member or authorized representative of a member Doron Broman	100 m	21	j
		Typed or printed name of signee	7 175 77 60 6 124 6 124	圣三	O
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Filing Fce: \$25.00