# orida Department of State

**Division of Corporations** Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140001629593)))



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To:

Division of Corporations

Fax Number : (850) 61.7-6383

From:

Account Name : ACCCUNTANT & MANAGEMENT INC

Account Number: I20110000070 Phone : (305)541-3980

Fax Number : (305)541-7033

\*\*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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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MANAGE SOLUTION LLC

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

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S. YOUNG

### H14000162959 3

### **COVER LETTER**

TO: Registration Section
Division of Corporations

MANAGE SOLUTION 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:

MOSES NAE

Name of Person

ACCOUNTANT & MANAGEMENT INC

Firm/Company

1549 NE 123RD ST

Address

NORTH MIAMI, FL 33161

City/State and Zip Code

INFO@TAXLEAF.COM

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

For further information concerning this matter, please call:

MOSES NAE

*,,*305、541-3980

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

# H14000162959 3 ARTICLES OF AMENDMENT

	TO DF ORGANIZATION	<del></del>	<b>212</b>	<del>-</del> -
ARTICLES	OF ORGANIZATION			
MANAGE SOLUTION LLC				
	Company as it now appears on our records.) imited Liability Company)		_	
The Articles of Organization for this Limited Liability Conformed Accument number <u>L14000072012</u>	npany were filed on 05/02/2014	and	gizes b	ned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	d liability company here:			
ALBERTO DAYAN LLC				
The new name must be distinguishable and end with the words "Limite	ed Liability Company," the designation "LLC" or t	the abbreviati	on "L.L	C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRE	SS)			
		三三		
		- 支援	C_	
Enter new mailing address, if applicable:		ا المارية المارية المارية	复	7
(Mailing address MAY BE A POST OFFICE BOX)		7 - 2 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	co	1 77
			770	
B. If amending the registered agent and/or register registered agent and/or the new registered office address		ter the na	me <u>cof</u>	the no
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida strees address			
	, Florida		<del></del> _	
	City	Zip C	ode	

#### New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to uct 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 = M $AMBR = A$	Anager Authorized Member	•	
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