

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.

(((H140002117843)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: CORP USA Account Name

Account Number: 072450003255

Phone : (305)634-3694

Enternine email address for this business entity to be used for future aritical report mailings. Enter only one email address please. \*\*

Fax Number

: (786)409-5946

STATE OR M/MG RESIGN
MODELYANI LLC **MODELYANI LLC** 

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

SEP 10 2014 J.BRUCE

https://efile.sunbiz.org/scripts/efilcovr.exe

9696889908

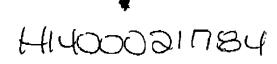
ZZ:SI #10Z/60/60

9/9/2014

ARUAMOS

PAGE 01/05





## **COVER LETTER**

TO

Registration Section
Division of Corporations

SUBJECT

Modelyani LLC

Name of Limited Linbility Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Yacov Shitrit

Name of Person

Modelyani LLC

Firm/Company

777 N W 72nd Avenue, #2088A

Address

Miami, Florida 33126

City/State and Zip Code

koby@bktradingco.com

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

For further information concerning this matter, please call:

Yacov Shitrit

,786 \357

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

2 \$25.00 Filing Fee

Signature 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 Taliahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Modelyani, LLC						
(Name of the Limited Lability Co. (A Florids Limit	nnany 15 It new appears on our recorded Liability Company)	1a)				
The Articles of Organization for this Limited Liability Company were filed on 05/20/2014 and assigned  Florida document number L14000081924.						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited l	iability company here:					
The new name must be distinguishable and end with the words "Limited I	Liability Company," the designation "L	LC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS	)	2				
	<u></u>					
		7 - F				
Enter new mailing address, if applicable:	41	- F				
(Mailing address MAY BE A POST OFFICE BOX)						
	<del></del>					
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l		ds, enter the using of fast new				
Name of New Registered Agent:						
New Registered Office Address:		,				
	Ener Florida street address					
	, I	lorida Ziv Code				
New Pegistered Agent's Signature, if changing Registered Age	•	\$₩ C4M#				
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent being filed to merely reflect a change in the registered off company has been notified in writing of this change.	agree to act in this capacity. I j lete performance of my duties, a as provided for in Chapter 605	and I am familiar with and , F.S. Or, if this document is				

PAGE 03/05

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the fitle, name, and address of each Manager or Anthorized Member being added or removed from our records:

	Name (Name	Address	Type of Action
R	TerlivA Jesus	335 S. Biscayne Blvd, #3407	<b>=</b> Add
	Yuval Avital	Miami, Florida 33131	O Remove
			DAdd
			Remove
_			
			ZHI SEP -9 Reference Series
			FP -9
_			_DAME =
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
<del></del>	***************************************		CI ANN
			Remove
	The same process to any own to an arrange of the same process of the same states of the s		D Add
			D Remove

Page 2 of 3

Fective date, if other than the date of filing: 09/10/2014 (critional) is effective data must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the document is filed by the Florida Department of States)  aied 09/09/2014  Signature of entember of authorized representative of a manufact  Vacov Shitrit	amending any other information,	enter change(s) here: (Attach addition	al sheets, if necessary.
ated 09/09/2014  Signature of a member of authorized representative of a member			
state this document is filed by the Florida Department of State)  (ited 09/09/2014    Signature of a member of authorized representative of a member			
state this document is filed by the Florida Department of State)  ordered 09/09/2014  Signature of a member or authorized representative of a member			*
ated 09/09/2014  Signature of a member of authorized representative of a member			
ated 09/09/2014  Signature of a member of authorized representative of a member			
ated 09/09/2014  Signature of a member of authorized representative of a member	ffective date, if other than the date	of filing: 09/10/2014	(crutional)
Signature of a member of authorized representative of a member	e date this document is filed by the Plorida!		more than 90 days after
Signature of a member of authorized representative of a member	09/09/2014	,	
Signature of a thember of authorized representative of a member	./	Vacuation	
Vacov Shitrit	X. Signi	· / 0	f a manuser
Timed as a moved none of House	Yacov Shitrit &		

Page 3 of 3 Filing Fee: \$25,00

