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MAR 12 2015 S. YOUNG

COVER LETTER

TO: Registration Division of	n Section Corporations		
8165	GLADES ROAD ASSOCIATES, LLC		
SUBJECT:	Name of Limited Liability Company		
The enclosed Article	es of Amendment and fee(s) are submitted for filing.		
Please return all corr	respondence concerning this matter to the following:		
•	Jason Lazar		
	Name of Person	-	
	Firm/Company	-	
	215 N Federal Highway		
	Address	- 256g 7 7	
	Boca Raton, FL 33432		-T
	City/State and Zip Code	2	-
	jlazar@investmentslimited.com E-mail address: (to be used for future annual report notification)		Ţ.,
For further informati	ion concerning this matter, please call:	(A) (A)	
Jason Lazar	561 392-8920	g with the made	
Na	me of Person Area Code Daytime Telephone Number	r	
Enclosed is a check	for the following amount:		
□ \$25.00 Filing Fe	(additional copy is enclosed) Certified	ite of Status &	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

8165 GLADES ROAD ASSOCIATES, LLC

company has been notified in writing of this change.

(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 w	ere filed on <u>5/13/2014</u>	and assigned
Florida document number L14000082212		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ty company here:	
The new name must be distinguishable and end with the words "Limited Liability	y Company." the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		元位 の
		語 田 田
		No F
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		The state of the s
		72
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records, ent	er the name of the no
New Registered Office Address:	Enter Florida street address	
	Florido	
	City , Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete po accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office a	erformance of my duties, and I a ovided for in Chapter 605, F.S. (m familiar with and Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Marta Batmasian	215 N. Federal Highway	□ Add
		Boca Raton, FL 33432	■ Remove
·			□ Add
			Remove
			<u>~~~</u> □ & ådd
			Remove 27
			□ Addy
			☐ Remove
			Add
		<u> </u>	Remove
			🗖 Remove

f amending any other information, ent	er change(s) here: (Attach addition	nal sheets, if necessary.)
-		
Effective data if other than the date of	Glings	(antional)
Effective date, if other than the date of the effective date must be specific, cannot be prior	to date of receipt or filed date and cannot be	(optional) e more than 90 days after
the date this document is filed by the Florida Depa		
Dated February 26		
	'	
Sangture	of a member or authorized representative of	of a member
James H. Barmaslan	on a member of authorized representative of	or a memoci
	Typed or printed name of signee	
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Filing Fee: \$25.00