

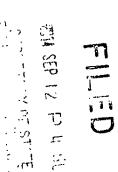
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EFFECTIVE DATE 09-12-14



B. BOSTICK

SEP 1 8 2014

### **COVER LETTER**

TO:

Registration Section Division of Corporations

SHRIECT

MALANI 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:

# PEARL BEN YORAM, ESQ

Name of Person

## MILITZOK & LEVY PA

Firm/Company

## 3230 STIRLING ROAD

Address

## HOLLYWOOD, FL 33021

City/State and Zip Code

### PEARL@MLLAWFL.COM

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

For further information concerning this matter, please call:

# PEARL BEN YORAM, ESQ.

,,954,727-8570

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MALANI LLC	
(Name of the Limited Liability Com (A Florida Limite	npany as it now appears on our records.)  ed Liability Company)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L14000099290</u> .	ny were filed on JUNE 20, 2014 and assigne
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	ability company here:
he new name must be distinguishable and end with the words "Limited L	iability Company," the designation "LLC" or the abbreviation "L.L.C.
Enter new principal offices address, if applicable:	
<u>Principal office address MUST BE A STREET ADDRESS)</u>	
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	221 E
B. If amending the registered agent and/or registered egistered agent and/or the new registered office address h	
	<del></del> -
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

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 **Title** <u>Name</u> **Address Type of Action** 3000 STIRLING ROAD, SUITE 316 \_\_\_\_ ■ Add YARIV AZULAY MGRMMBR HOLLYWOOD, FL 33021 CRemove **ODED HAIMS** 3000 STIRLING ROAD MGR **SUITE 316 ■** Remove HOLLYWOOD, FL 33021 ☐ Add ☐ Remove \_□ Remove ☐ Remove

i amendii	ng any other information, enter change(s) here: (Allach additional sheets, if necessary.)
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The effective	late, if other than the date of filing: SEPTEMBER 12, 2014 (optional) date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after document is filed by the Florida Department of State)
Dated SE	EPTEMBER 12 2014
	Signature of a member or authorized representative of a member  PEAL DEN YOLAM, ESO
-	Typed or printed name of signce

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Filing Fee: \$25.00