# 114000119970

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
•		

Office Use Only



400278295364

10/27/15=71009=9503 \$45.00

SECRETARY OF STATE ANASSES FLORIDA

OCT 2 8 2015 Y SULKER



### TRUSTS, ESTATES & ELDER LAW

2425 Clover Street - Rochester, NY 14618 (585) 271 - 4470 tel - (585) 271 - 0847 fax - (800) 330 - 4470 toll free Website: www.kroll-lawoffice.com

RICHARD A. KROLL, J.D., LL.M. CAROLYN A. REARDON, J.D. VINCENT P. ARCARESE, ESQ.

MARY C. CASSARA, PARALEGAL
LYNETTE M. ILIEVSKI, MEDICAID ADMINISTRATOR
RACHEL R. LUDWIG, PARALEGAL
CYNTHIA R. YAEGER, SR. ESTATE PARALEGAL
BETHANY E. DRIES, LEGAL ASSISTANT
DEBORAH S. SCHILLER, ESTATE PARALEGAL
KATHRINE A. OSTERWINTER, ESTATE PARALEGAL

October 19, 2015

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

RE: SECOND AMBASSADOR REALTY, LLC

Gentleperson:

In reference to the above Limited Liability Company, I am enclosing Articles of Amendment To Articles of Organization. Please amend the registered agent of the Corporation. I enclose a check payable to the Florida Department of State in the amount of \$25.00.

Additionally, I am requesting that you furnish our office with the original Filing Receipt in the self-addressed stamped envelope provided herewith for this purpose.

Should you have any questions regarding this matter, please contact my paralegal, Mary C. Cassara.

Thank you in advance for your cooperation and assistance.

Very truly yours,

KROLL LAW FIRM, LLP

Richard A. Kroll, Esq

RAK:mcc Enclosures

c: Jerome Glazer

## **COVER LETTER**

Div	ision of Corp	orations				
SUBJECT:	Second Amb	assador Realty, LLC				
SUBJECT.		Name of Limit	ed Liability Company			
The enclosed	l Articles of A	mendment and fee(s) are subm	nitted for filing.			
Please return	all correspon	dence concerning this matter to	o the following:			
		Richard A. Kroll, Esq.				
Name of Person						
		Kroll Law Firm, LLP				
Firm/Company						
		2425 Clover Street				
		Rochester, New York 14613	8			
		·	City/State and Zip Code			
		E-mail address: (to	be used for future annual repo	ort notification)		
For further i	nformation co	ncerning this matter, please cal	11:			
Richard A.	Kroll, Esq.		585 271-44 at ()	470		
	Name of	Person	Area Code	Daytime Telephone Number	<del></del>	
Enclosed is	a check for the	following amount:				
\$25.00 1	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	d) Certified	te of Status &	

MAILING ADDRESS:

TO:

**Registration Section** 

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

Second Ambassador Realty, 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 July 30, 2014 and assigned Florida document number \_\_\_\_\_L14000119970 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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, enter the name of registered agent and/or the new registered office address here: InCorp Services, Inc. Name of New Registered Agent: 67th Court North New Registered Office Address:

### 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
Sara Brautigath on behalf of InCorp.
Services Inc.

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member <u>Title</u> Name **Address** Type of Action □ Add \_□ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change \_□ Add ☐ Remove ☐ Change

			<del></del>
_			
_			
_	· .		
_			
_			
			<del></del>
_			<del></del>
-			
_			
		AL.	
_			) 
		AHAS	
_		(O)	2
		, TT	
_			
_			••
		<b>3</b> 2.	37
		37	<del></del>
fecti	e date, if other than the date of filing: (option	onal)	
n effe	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after	filing.) Pursuant	t to 605.020
cume	the date inserted in this block does not meet the applicable statutory filing requirements, this t's effective date on the Department of State's records.	date will not	be listed as
	and amountaine and allowed afficiently and allow the state of the stat		
The	rd specifies a delayed effective date, but not an effective time, at 12:01 a Oth day after the record is filed.	i.m. on the	earlier o
	9/1/		
ited _	9/7/15		
	Signature of a member or authorized representative of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00