

L1400013230

Florida Department of State
Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : PAUL A. KRASKER, P.A.

Account Number : I20090000078

Phone : (561) 801-7312

Fax Number : (561) 515-2939

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: p.krasker@kraskerlaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
233 DESOTA, LLC

Certificate of Status	0
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Estimated Charge	\$25.00

T. Burch SEP 9 2014
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Sep. 4. 2014 6:35PM

No. 0985 P. 2

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 233 DESOTA, 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:

PAUL A. KRASKER

Name of Person

THE LAW OFFICE OF PAUL A. KRASKER, P.A.

Firm/Company

501 S. Flagler Drive, Suite 201

Address

West Palm Beach, FL 33401

City/State and Zip Code

pkrasker@kraskerlaw.com

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

For further information concerning this matter, please call:

Paul A. Krasker

Name of Person

at **(561) 515-2920**

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

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

233 DESOTA, 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 August 22, 2014 and assigned
Florida document number L14000132301.

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 end with 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)

501 S. Flagler Drive, Suite 201

West Palm Beach, FL 33401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

501 S. Flagler Drive, Suite 201

West Palm Beach, FL 33401

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida 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

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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 = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	BURTON S. MINKOFF	233 Desoto Road	<input type="checkbox"/> Add

West Palm Beach, FL 33405 ☐ Remove

MGR	BURTON S. MINKOFF	501 S. Flagler Drive, Suite 201	<input type="checkbox"/> Add
		West Palm Beach, FL 33401	<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated August 28, 2014



Signature of a member or authorized representative of a member

Paul A. Krasker

Typed or printed name of signer

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Filing Fee: \$25.00

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