

18/2014

Division of Corporations

Florida Department of State
Division of Corporations
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L14000138547

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ROTHMAN & TOBIN, P.A.
Account Number : I20000000031
Phone : (305)895-3225
Fax Number : (305)895-7175

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
824 MERIDIAN, LLC**

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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICESSEP 19 2014
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **842 Meridian, 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:

Lawrence Kaizen

Name of Person

Rothman & Tobin, P.A.

Firm/Company

11900 Biscayne Blvd #740

Address

Miami, FL 33181

City/State and Zip Code

lkaizen@rothmanandtobin.com

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

For further information concerning this matter, please call:

Lawrence Kaizen

Name of Person

at **(305) 895-3225**

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 &
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(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

09/18/2014 09:48

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ROTHMAN & TOBIN P.A.

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850-617-6381

"9/18/2014 9:21:00 AM" PAGE 17001 Fax Server



September 18, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

824 MERIDIAN, LLC
824 MERIDIAN AVENUE
UNIT 3E
MIAMI BEACH, FL 33139

SUBJECT: 824 MERIDIAN, LLC
REF: L14000138547

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

FAX Aud. #: H14000218582
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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

824 Meridian, 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 9/4/2014 and assigned
Florida document number L14000138547.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

842 Meridian, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

842 Meridian Avenue Unit 3E

Miami Beach, FL 33139

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

842 Meridian Avenue Unit 3E

Miami Beach, FL 33139

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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DIVISION OF CORPORATIONS

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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>
_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

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

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 09-17, 2013.

X



Signature of a member or authorized representative of a member

Giuseppe Benedetto

Typed or printed name of signer

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