

L14000139103

Florida Department of State
Division of Corporations
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(((H14000287583 3)))



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To:

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

From:

Account Name : SIEGELAUB, ROSENBERG, GOLDING & FELLER, P.A.
Account Number : I19990000058
Phone : (954)753-2222
Fax Number : (954)753-1123

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

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
124 HENDRICKS ISLE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

RECEIVED

14 DEC 12 AM 10:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 DEC 12 AM 8:00

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Corporate Filing Menu

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DEC 15 2014

T. HAMPTON

12-12-'14 15:25 TO- 18506176383

FROM- SIEGELAUB PA, INC

P0002/0004 T-046 F-728

H140002810000

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

124 Hendricks Isle, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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14 DEC 12 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 9/5/2014 and assigned
Florida document number L14000139103

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)

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 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

H140002875833

12-12-'14 15:25 TO- 18506176383

FROM- SIEGELAUB PA, INC

P0003/0004 T-046 F-728

H140002815833

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>
AMBR	Nir Edri	300 Oakwood Lane	<input checked="" type="checkbox"/> Add
		Hollywood, FL 33020	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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TALLAHASSEE, FLORIDA

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H140002875833

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 December 12, 2014



Signature of a member or authorized representative of a member

Dror Tohar

Typed or printed name of signee

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