11/15/2017

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000301945 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INTERSTATE FILINGS LLC

Account Number : I20110000086 Phone

: (718)569-2703

Fax Number

: (718)504-7890

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

		contact@interstate::::ings.com
mail	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BAROUCH 16731 SW 5TH CT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAROUCH 16731 SW 5TH CT, LLC

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

1.	A Florida Elimited Clability Company)		
The Articles of Organization for this Limited Lia	ability Company were filed on 09/2	22/2014 and assi	gned
Florida document number <u>L14000147803</u>	—- <u></u> -		
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of t	the limited liability company here	:	
The new name must be distinguishable and end with the wa	ords "Limited Liability Company," the des	ignation "LLC" or the abbreviation "L	ï. c.:
Enter new principal offices address, if applical	ble:		
(Principal office address MUST BE A STREET	ADDRESS		
Enter new mailing address, if applicable:	·		
(Mailing address MAY BE A POST OFFICE B)	<u>0x)</u>		
	·		
Name of New Registered Agent: New Registered Office Address:	Enter Florida		
	City		
New Registered Agent's Signature, if changing Reg		Esp vinte	
hereby accept the appointment as registered a provisions of all statutes relative to the proper secept the obligations of my position as registed in the obligations of my position as registed peing filed to merely reflect a change in the region pany has been notified in writing of this change in the change in	and complete performance of my read agem as provided for in Chap gistered office address. I hereby co ange.	duties, and Lam familiar with : oter 605 FS Or Advis docum	and ont is
	Page 1 of 3		728
		*1	
			~F;
			<u>.</u>

If amending Authorized !	the Managers or Authorized Member Member being added or removed from	on our records, enter the title, name, and address our records:	of each Man	авет (<u>r</u>
MGR = Market MBR = Au	anager uthorized Member				
<u>Title</u>	Name	Address	Type of Act	rion	
MGR	ELSDUNNE, TAMAR	10620 GRIFFIN ROAD SUITE 108			
		COOPER CITY, FL 3332			
MGR	BAROUCH, YONATHAN	10620 GRIFFIN ROAD SUITE 108	A.4.5		
		COOPER CITY, FL 33328			
		!			
					
·		: '.	□ Add	211	
			□ Add	7 NOV 28 - 63 10: 33	क्षेत्र १ म मे हु राज्यसम्बद्धाः १ २ वर्षः १

Page 2 of 3

D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
**	
-	
E. Effective (The effection the date the	the date, if other than the date of filing: (optional) (optional) (optional) (optional) (optional) (optional) (optional) (optional) (optional) (optional)
Dajed _	
	Signature of a member or authorized representative of a member
	YONATHAN BAROUCH
	Typed or printed name of signee

Page 3 of 3