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JOHN L. AVERY, JR. CHARTERED JAQUELINE DELGADO, ESQ. 6 LISE L. HUDSON, PIÀ.C. 6 JOSEPH C. KEMPE, ESQ. 1.2.3 MARNIE R. PONCY, ESQ. 5 ASHLEY M. SUNDAR, P.A. DAVID C. TASSELL, P.A. CHARLES R. L. WHITE, CHARTERED⁴

'EL.M. IN TAX LAW
'BOARD CERTIFIED IN TAX LAW
'BOARD CERTIFIED IN TAX LAW
'BOARD CERTIFIED IN N.C. AND N.Y
'ALSO ADMITTED IN N.C. AND N.Y
'REGISTEED NURSE
'OF COUNSE.

TAX AND FIDUCIARY ACCOUNTANTS CHRIS BOURDEAU CPA, BENJAMIN DEVLEN CPA, KYLE DONHAM CPA, AARON M. FLOOD, MAUREEN ELOYD-RIGAUDON PATRICK E. MANGAN CPA, KRISTI RAMADANI

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Main Office

941 North Highway A1A Jupiter, Florida 33477

TELEPHONE (561) 747-7300 FAX (561) 747-7722

January 13, 2015
Please respond to our Jupiter Office

STUART OFFICES 1101 EAST OCEAN BOULEVARD STUART, FLORIDA 34994 TELEPHONE (772) 223-0700 FAX (772) 223-0707

ADMINISTRATIVE BRANCH SATURN STREET JUPITER, FLORIDA 33477 FAX (561) 747-7722

> VERO BEACH 772-562-4022

NATIONAL WATS LINE 1-800-747-3113

WEBSITE
WWW.JCKEMPE.COM

ADMINISTRATION JANET CARR, ESTHER GARNER, TAMI G. KEMPE, GAY LATHE

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE:

Palm Ave Coin Laundry, LLC

Our File No.: 331.603

Dear Sir or Madam:

Enclosed are Articles of Amendment and our firm check in the amount of \$60.00 for the fee for submitting the same.

Please process these forms accordingly.

We thank you in advance for your assistance with this matter. Should you have any questions, please feel free to contact us. Please return to us the certificate of status and the certified copy in the enclosed return envelope.

SIGNED IN
JOSEPH C. KEMPE'S
ABSENCE SO AS NOT TO
DELAY MAILING

Very truly yours,

Joseph C. Kempe

oseph (Kempe /al)

JCK/amo Enclosures

COVER LETTER

9	of Corporations		
Palr	n Ave Coin Laundry, LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Artic	les of Amendment and fee(s) are subi	nitted for filing.	
Please return all co	rrespondence concerning this matter t	to the following:	
	Joseph C. Kempe, E	squire	
		Name of Person	····
	Joseph C. Kempe, P	PA .	
		Firm/Company	
	941 N. Highway A1A		
		Address	_
	Jupiter, FL 33477		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	joekempe@jckempe. E-mail address: (1	COM to be used for future annual report notifi	cation)
For further informa	ation concerning this matter, please ca		
Joseph C. Ke	mpe	at () 747-7300 Area Code Daytime	
)	Name of Person	Area Code Daytime	Telephone Number
Enclosed is a checl	k for the following amount:		
□ \$25.00 Filing I	Fee \$\Bigcup \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ŀ

Palm Ave Coin Laundry, 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 October 17, 2014 and assigned Florida document number L14000162552 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 Florida 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

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>Name</u>	Address	Type of Action
Christopher S. Mayer	2 Grove Isle Drive	
	Coconut Grove, FL 33133	■ Remove
MGR Helvetia CL, LLC	2 Grove Isle Drive	■ Add
	Coconut Grove, FL 33133	Remove
MBR Christopher S. Mayer	2 Grove Isle Drive	□ Add
	Coconut Grove, FL 33133	Remove
MBR Helvetia CL, LLC	2 Grove Isle Drive	■ Add
	Coconut Grove, FL 33133	Remove JAN
		JAN 20 PAG
		ORIU PRemove
		□ Remove
	Christopher S. Mayer Helvetia CL, LLC Christopher S. Mayer	Christopher S. Mayer 2 Grove Isle Drive Coconut Grove, FL 33133 Helvetia CL, LLC 2 Grove Isle Drive Coconut Grove, FL 33133 Christopher S. Mayer 2 Grove Isle Drive Coconut Grove, FL 33133 Helvetia CL, LLC 2 Grove Isle Drive Coconut Grove, FL 33133

<u></u>
(optional) be more than 90 days after
of a member

Page 3 of 3

Filing Fee: \$25.00

