	Florida Department of State Division of Corporations		
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	To: Division of Corporations Fax Number : (850)617-6383		
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	Account Name : SNYDER GROISMAN P.A. Account Number : I20120000060 Phone : (786)899-2880 Fax Number : (786)899-2890		
	Enter the email address for this business entity to be used for future on annual report mailings. Enter only one email address please.		
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FIRST FUND 18, LLC			
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	Estimated Charge \$25.00		
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To: Page 14 of 17

COVER LETTER

TO: **Registration Section Division of Corporations** SUBJECT: FIRST FUND 18, 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: Myles Mocega Name of Person Snyder Groisman, P.A. Firm/Company 21500 Biscayne Blvd. Sulte 401 Address Aventura, FL 33180 City/State and Zip Code myles@snydergroisman.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Melissa Groisman 786 899-2880 et (Name of Person Daytimo Telephone Number Area Code Enclosed is a check for the following amount: □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & 🗱 \$25.00 Filing Fee S60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations**

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

	2015-06-23 18.24:42 (GMT)	786-899-2890 From: Melissa Groisma
E Page 15 of 17	-	FILED
	ARTICLES OF AMENDMENT	2010
	TO -	LUTS JUN 23 AM O
	ARTICLES OF ORGANIZATION	Strate 1 40 8:30
	OF	2015 JUN 23 AM 8: 30 SLUKE IARY OF STATL FALLANASSEE, FLORIDE
(FIRST FUND 18, LLC Name of the Limited Liability Company as It now appears on our re (A Florida Limited Liability Company)	cords.)
The Articles of Organization for	r this Limited Liability Company were filed on12/08/2	014 and assigned
Florida document number	L14000187193	
This amendment is submitted to	amend the following:	
A. If amending name, <u>enter fl</u>	he new name of the limited liability company here:	
The new name must be distinguishable	and contain the words "Limited Liability Company," the designation "	LC?" or the abbreviation "L.L.C."
Enter new principal offices ad	dress, if applicable:	
(Principal office address MUST	<u> BEA STREET ADDRESS)</u>	
	ed agent and/or registered office address on our reco w registered office address here:	rds, enter the name of the new
Name of New Register	ed Agent:	
New Registered Office		م من
	Enter Florida street ada	lress
	City	Florida Zip Code
New Registered Agent's Signatur		wyr wolde
provisions of all statutes relati- accept the obligations of my po	nt as registered agent and agree to act in this capacity. I we to the proper and complete performance of my duties, osition as registered agent as provided for in Chapter 60, change in the registered office address, I hereby confirm writing of this change. If Changing Registered Agent, Signatur	and I am familiar with and 5, F.S. Or, if this document is that the limited liability
	Page 1 of 3	

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2015-06-23 18:24:42 (GMT)

786-899-2890 From: Melissa Groisman

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	BASSAN, DAVID	20900 NE 30TH AVENUE #507	D Add
		AVENTURA, FL 33180	X Remove
		<u></u>	Change
MGR	HAMMER, ABRAHAM	20900 NE 30TH AVENUE #507	🖸 Add
		AVENTURA, FL 33180	🕅 Remove
			Change
MGR	BENZAQUEN, JOSE	20900 NE 30TH AVENUE #507	🖸 Add
		AVENTURA, FL 33180	Remove
			Change
MGR	BAIT REAL ESTATE, LLC	20900 NE 30TH AVENUE #507	Add
	a Florida limited liability company L13000083962	AVENTURA, FL 33180	CI Remove
			Change
			Add Remove Remove
			🗆 Change

To: Page 17 of 17

786-899-2890 From: Melissa Groisman

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

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THIS JUN 23 AM 8.30
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E. Effective date, if other than the date of filing: _______(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing) Pursuant to 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

2315 Dated Signature of a member or patholized representative of a member man d or printed name of signed

Page 3 of 3 Filing Fee: \$25.00