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(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ddress)	
(Cir	ty/State/Zip/Phone	» #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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1. HARRIS

COVER LETTER

Division of Co	orporations		
Town Sq.	uare 432, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	Plamen Todorov		
		Name of Person	
	Town Square 432, LLC		
		Firm/Company	
	925 NW 80 Ter		
		Address	
	Margate, FL 33063		
	plameto@gmail.com	City/State and Zip Code	
For further information	E-mail address: (concerning this matter, please concerning this matter).	to be used for future annual repo all:	on notification)
Plamen Todorov		561 305-45	535
Name	of Person	at () Area Code 1	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 & Certified Copy (additional copy is enclosed	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

10wn Square 432, LLC	Liability Compa	ny as it now annears on our rec	ords.)		
(A	Florida Limited I	ny as it now appears on our rec Liability Company)	0. 00. j		
he Articles of Organization for this Limited Liab lorida document number	oility Company	were filed on		_ and as	ssigned
his amendment is submitted to amend the follow	ving:				
. If amending name, enter the new name of t	he limited liab	ility company here:			
ne new name must be distinguishable and contain the wor	ds "Limited Liabil		LC" or the abbro	eviation "l	L.L.C."
Enter new principal offices address, if applicable:		925 NW 80 Ter			
Principal office address MUST BE A STREET ADDRESS)		Margate, FL 33063	20. E.L.	<u> </u>	E <i>Dra</i> za
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		925 NW 80 Ter	mer.	9	
nter new mailing address, if applicable:	Margate, FL 33063	—————————————————————————————————————		et is a	
Mailing address MAY BE A POST OFFICE BO			~	<u></u>	
			<u></u>	0	
. If amending the registered agent and/or egistered agent and/or the new registered office agent. Name of New Registered Agent:		<u>e</u> :	ords, <u>enter th</u>	e name	of the
	925 80 Ter				
New Registered Office Address:		Enter Florida street add	drage	·	
	Margate	emei Fioriaa sireet aad	3306	3	
	ivialgaic		Florida 5300		
		City		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

It 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Morjorian A Todorov	5630 Pacific Blvd, Apt 818	Add
		Boca Raton, FL 33433	■ Remove
			☐ Change
MGR	Plamen I Todorov	925 NW 80 Ter	Add
		Margate, FL 33063	Remove
			☐ Change
			Add
		***	□ Remove
			☐ Change
			Add Remover-
			Change:
			_ □ Remove
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Effective d	ate, if other than the date of filin	ng:	(optional)	(05 0007 (
		nd cannot be prior to date of filing or more the meet the applicable statutory filing requ		
document's	effective date on the Department of	State's records.		
	specifies a delayed effective h day after the record is filed	date, but not an effective time, .	at 12:01 a.m. on the ϵ	earlier of:
Dated	11/16	2015	,	
	De 1	0	MILL	2015 NOV 19
-	Signature of a	a member or authorized representative of a r	nember = :	
	0	TODOROV	88 883	G France
		/ / / 27 / / 12 / ///	11.2	e se ambre base
_	PLAMEN		[11 ₍₋₎	
-	PLAMEN	Typed or printed name of signee	<u>mc.</u>	

Page 3 of 3

Filing Fee: \$25.00