

L150000 22585

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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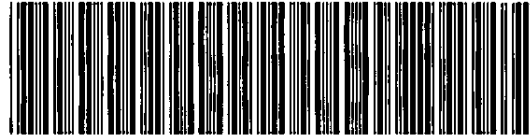
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: APPALOOSA15 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:

JOSEPH P.MULLEN, AGENT

Name of Person

MULLEN & BIZZARRO. P.A

Firm/Company

2929 E. COMMERCIAL BLVD, PH-C

Address

FORT LAUDERDALE, FL 33316

City/State and Zip Code

JPMULLEN@MULLENBIZZARRO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH P. MULLEN

954 772-9100
at ()

Name of Person

Area Code

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:

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**

APPALOOSA15 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 02/05/2015 and assigned
Florida document number L15000022585.

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 contain 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)

3075 W OAKLAND PARK BLVD #200

FORT LAUDERDALE, FL 33311

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO BOX 4175

FORT LAUDERDALE, FL 33338

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:

SNS REAL ESTATE MANAGEMENT LLC

New Registered Office Address:

3075 W OAKLAND PARK BLVD #200

Enter Florida street address

FORT LAUDERDALE

City

, Florida 33311

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.

SNS REAL ESTATE MANAGEMENT LLC

NOAM HANOCH AVRAHAMI
If Changing Registered Agent, Signature of New Registered Agent

BY: NOAM HANOCH AVRAHAMI, a member

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	M.I.M real estate management llc	601 W OAKLAND PARK BLVD ;	<input type="checkbox"/> Add
		OAKLAND PARK, FL. US 33311	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SNS real estate management llc	3075 W OAKLAND PARK BLVD	<input type="checkbox"/> Add
		#200	<input type="checkbox"/> Remove
		FORT LAUDERDALE, FL 33311	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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FALL HASSIE, FLORIDA

16 JUN 20 PM 4:45
OFFICE OF STATE
ATTORNEY GENERAL
TALLAHASSEE, FLORIDA

16 JUN 20 PM 4:45
OFFICE OF STAFF
ATTORNEY GENERAL
TALLAHASSEE, FLORIDA

Note: 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.

Dated June 17, 2016.

Joseph P. Mulla
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Joseph P. Mullen, legal counsel

Typed or printed name of signee