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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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FILED
15 MAR 27 AM 8:33
OFFICE OF STATE
TOLSON, J. EDGAR

APR 16 2015

COVER LETTER

TO: Registration Section
Division of Corporations

MADDISON AVE , LLC

SUBJECT: _____
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:

Anna BEDETTI

Name of Person

MADDISON AVE , LLC

Firm/Company

574 NW 35TH PL

Address

BOCA RATON FL 33431

City/State and Zip Code

Annadeboca@yahoo.com

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

For further information concerning this matter, please call:

ANNA BEDETTI

561

400 0423

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

**TO
ARTICLES OF ORGANIZATION
OF**

MADDISON AVE , 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 _____ and assigned
Florida document number _____.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

none

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:

none

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

NONE

(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:

NONE

New Registered Office Address:

NONE

Enter Florida street address

_____, Florida

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

Authorized Member 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>
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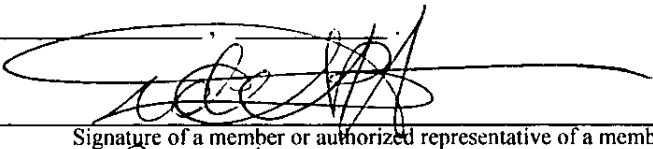
SECRETARY OF STATE
BELLAMY
15 MAR 27 AM 8:33
15 MAR 27 AM 8:33

SEE PAGE 4 : adding New articles of organisation ✓

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated _____


Signature of a member or authorized representative of a member

Anna Bedetti

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
15 MAR 27 AM 8:33
CLERK OF STATE
TALLAHASSEE, FLORIDA

VII Ownership of LLC and Shares

There will be 100 Shares issued comprising to complete ownership of LLC

1. Anna Bedetti has ownership of 25% of all shares (25 shares)
2. Jeffrey Zapoleon has ownership of 75% of all shares (75 shares)

VIII Inherited Shares

If Jeffrey Zapoleon is deceased
all his shares (75%) shall pass to Anna Bedetti
without probate

(only a death certificate will be needed)

If Anna Bedetti is deceased her share
shall be split evenly between her two children:

- A. Jayne Salama
- B. Eitan Salama

IX Commission and Fees

The following commissions and fees shall be paid
to Anna Bedetti for services rendered :

1. Property purchase commission covering (research potential seller and negotiating purchase price).

2. Renovation fee (design, coordination of contractors and purchase of all materials needed for renovation)

3. Commission for identifying buyer and negotiating sale of property.