## L150000 72175

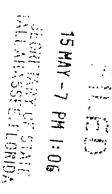
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

	on Section f Corporations
EM 8	960 LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articl	es of Amendment and fee(s) are submitted for filing.
	respondence concerning this matter to the following:
rease return an con	respondence concerning this matter to the following,
	TAD GROUND
3	Name of Person
<b>\f</b> .	NUGENT & GROUND, LLC
	Firm/Company
	2455 E. Sunrise Blvd., Suite 807
	Address
	Fort Lauderdale, FL 33304
	City/State and Zip Code .
	eyalmgo@gmail.com  E-mail address: (to be used for future annual report notification)
For further informat	ion concerning this matter, please call:
Eyal Musli	954 537-1717
N	ame of Person at ()  Area Code Daytime Telephone Number
Enclosed is a check	for the following amount:
■ \$25.00 Filing F	ee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
R D P.	AILING ADDRESS:  egistration Section  ivision of Corporations O. Box 6327  illahassee, 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

EM 8960 LLC			
(Name of the Limited	Liability Company as it now appears on our r Florida Limited Liability Company)	ecords.)	
The Articles of Organization for this Limited Liab	ility Company were filed on 4/23/2015		and assigned
Florida document number L15000072175			
This amendment is submitted to amend the follow	ing:		
A. If amending name, <u>enter the new name of the same o</u>	ne limited liability company here:		
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designation	"LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:		-
(Principal office address MUST BE A STREET)	ADDRESS)		<u></u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		cords, <u>ent</u>	er the name of the no
Name of New Registered Agent:			A HAY
New Registered Office Address:			22 7 pm
	Enter Florida street a	ddress	PA IT
		_, Florida .	CO TO TOWN
	City		= Zip Sille

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 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
AMBR	EYAL MUSLI	653 GRAND CONCOURSE	
		MIAMI SHORES, FL 33138	☐ Remove
			Change
AMBR	MIRIAM L MUSLI	653 GRAND CONCOURSE	
ì	· ·	MIAMI SHORES, FL 33138	☐ Remove
			<b>□</b> Change
			☐ Remove
			Change
			□ Remove
			Change
			☐ Remove
			□ Change
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	04/23/2015			$\Xi_{c}$
ctive date, if other than the effective date is listed, the date must	date of filing:		(optional) han 90 days after filing ) Pi	irsugati to 605 0
e: If the date inserted in this blo	ock does not meet the applic	able statutory filing re-	quirements, this date wil	finot be fisted
ument's effective date on the De	partment of State's records			
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record specifies a delayed	effective date, but no	t an effective time	e, at 12:01 a.m. ȯ̀ <u>n</u>	
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C	Tral Musli			
•		orized representative of a		

Page 3 of 3

Filing Fee: \$25.00