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2015-06-23 18:27:42 (GMT-04:00)

86-899-2880 From: Melissa Groisman

6/23/2015

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

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 annual report mailings. Enter only one email address please.****

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15 JUN 23 PM 2:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SECOND FUND 18, LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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K. SALLY
EXAMINER
JUN 24 2015

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SECOND 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. Suite 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

Name of Person

at (786)

Area Code

899-2880

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

FILED
2015 JUN 23 AM 8:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

SECOND FUND 18, 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 06/12/2015 and assigned
Florida document number L15000103144

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)

Enter new mailing address, if applicable:

(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:

New Registered Office Address:

Enter Florida street address

City

Florida

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

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> |
|--------------|--|---------------------------|--|
| MGR | BASSAN, DAVID | 20900 NE 30TH AVENUE #507 | <input type="checkbox"/> Add |
| | | AVENTURA, FL 33180 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | HAMMER, ABRAHAM | 20900 NE 30TH AVENUE #507 | <input type="checkbox"/> Add |
| | | AVENTURA, FL 33180 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | BENZAQUEN, JOSE | 20900 NE 30TH AVENUE #507 | <input type="checkbox"/> Add |
| | | AVENTURA, FL 33180 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | BAIT REAL ESTATE, LLC a Florida limited liability company L13000083962 | 20900 NE 30TH AVENUE #507 | <input checked="" type="checkbox"/> Add |
| | | AVENTURA, FL 33180 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |

2015 JUN 23 18:24
STATE OF FLORIDA
SUNSHINE STATE
TALLAHASSEE, FL 32301

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

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2015 JUN 23 AM 8:40
CLERK OF STATE
TALLAHASSEE, FLORIDA

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)
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.

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.

Dated 6/23/15

Signature of a member or authorized representative of a member
Melissa Groisman Authorized Agent

Typed or printed name of signee