

L15000 108170

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

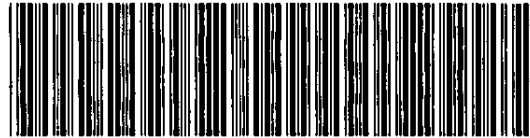
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/28/16--01028--014 \*\*25.00

16 JUN 28 PM 2:32

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STATE  
CLERK  
JUL 1 2016

JUN 29 2016

S. YOUNG

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PARTY Masters and Catering Services  
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:

Max S. Wasserman  
Name of Person

PARTY Masters and Catering Services  
Firm/Company

1218 Dyer Blvd.  
Address

Kissimmee, Florida 34741  
City/State and Zip Code

PARTY FL 123 @ gmail. com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Max S. Wasserman at ( 407 ) 350-2181  
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

555-89-97  
87 9/79

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION OF**

**FILING CANCELLED  
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Party Masters and Catering Services

(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 6/22/2015 and assigned Florida document number 215000108170

This amendment is submitted to amend the following:

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

N/A

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)

1218 Dyer Blvd  
Hissimmee, FL 34741  
SAME AS ABOVE

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CLERK OF COURT  
HISSEEMEE

**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:

MAX S. WASSERMAN

New Registered Office Address:

1218 Dyer Blvd.

Enter Florida street address

Hissimmee

City

Florida 34741

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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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<u>PRES</u>	<u>Julia Wasserman</u>	<u>4828 Cumbran Lakes Dr</u>	<input type="checkbox"/> Add
		<u>Kissimmee FL 34746</u>	<input checked="" type="checkbox"/> Remove

☐ Change

<u>Secr.</u>	<u>Alexandria Zapata</u>	<u>4828 Cumbran Lakes Dr</u>	<input type="checkbox"/> Add
		<u>Kissimmee FL 34746</u>	<input checked="" type="checkbox"/> Remove

☐ Change

<u>Treas</u>	<u>Alexandria Zapata</u>	<u>4828 Cumbran Lakes Dr</u>	<input type="checkbox"/> Add
		<u>Kissimmee, FL 34746</u>	<input checked="" type="checkbox"/> Remove

☐ Change

<u>Pres.</u>	<u>May Wasserman</u>	<u>1218 Dyer Blvd.</u>	<input checked="" type="checkbox"/> Add
		<u>Kissimmee FL 34741</u>	<input type="checkbox"/> Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

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

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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 June 21st, 2016



Signature of a member or authorized representative of a member

MAX S. WASSERMAN

Typed or printed name of signee