

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 : GUZMAN & GUZMAN, P.A.

Account Number : I20080000090

Phone : (305) 670-1991

Fax Number

; (305)670-1993

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SIMJAH, LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$25.00

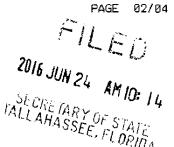
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Electronic Filing Menu

Corporate Filing Menu

Help

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



SIMJAH, LLC		*Self(I)
(Name of the Limited Linb (A Flori	ility Company as it now appears on our records.) do Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 07/20/2015	and assigned
Florida document number L15000124056	 ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		No.
B. If amending the registered agent and/or registered agent and/or the new registered office ac	gistered office address on our records, idress here:	enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da Zin Code
	WIIY	resis prompte

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JOSE NORBERTO KAPLUN	9130 S DADELAND BLVD	
		STE 1509	□ Remove
		MIAMI FL, 33156	☐ Change
MGR	MARIO GOLDBERG	20000 E COUNTRY CLUB DR	■ Add
		APT PH 1	☐ Remove
		AVENTURA FL, 33180	_ □ Change
			Add
			Remove
			Change SECJE IAI ALLAHAS
			LE TARRIDA Add
			□ Remove
			☐ Change
			□ Add
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record speci The 90th day	fles a delayed e after the record	fective did is filed.	ate, but no	t an effecti	ve time, at	12:01 a.m.	on the earlier
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