

LI5 000 166537

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : FELDMAN & ASSOCIATES
Account Number : I20130000018
Phone : (786)288-5699
Fax Number : (866)856-1462

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

Email Address: paul@feldmanclosings.com

RECEIVED
15 OCT 29 15:07:39 AM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA 32304

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
EXECUTIVE INN LLC

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

OCT 30 2015

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

EXECUTIVE INN 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 09/30/2015 and assigned
Florida document number L15000166537.

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)

2854 STIRLING RD, UNIT G

HOLLYWOOD, FL 33020

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2854 STIRLING RD, UNIT G

HOLLYWOOD, FL 33020

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:

Paul Feldman, P.A.

New Registered Office Address:

2750 NE 185th Street, Suite 203

Enter Florida street address

Aventura

Florida 33180

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

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	Eran Hamami	2854 STIRLING RD, UNIT G	<input checked="" type="checkbox"/> Add
		HOLLYWOOD, FL 33020	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CORPORATE REGISTRY OF AM	3389 SHERIDAN STREET SUITE	<input checked="" type="checkbox"/> Add
		HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ALAN N RAZLA PA	3113 STIRLING RD STE 203	<input type="checkbox"/> Add
		FT LAUDERDALE, FL 33312	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

15 OCT 29 AM 7:50
SECRETARY 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 October 15, 2015

Signature of member or authorized representative of a member

Alan N Razia

Typed or printed name of signee