

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 : GILMAN CIOCIA INC.

Account Number : I20120000051

: (305)937-7773

Fax Number

: (815)301-2897

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

Email Address: aliza. benshimon@gtax. com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

GEFILTEFISH 770 LLC

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

L16000008666

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FEB 0 5 2016

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

		**	
GEFILTEFISH	770 LLC		
(Name of the Lim	(A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited I	Liability Company	were filed on 01/12/2016	and and assigned
Florida document number L16000008666	······································		0A A
This amendment is submitted to amend the following	llowing:		
A. If amending name, enter the new name	of the limited liak	oility company here:	
The new name must be distinguishable and contain the	words "Limited Liab	lity Company," the dosignation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	19630 NE 26th AVE	
(Principal office address MUST BE A STRE	(Principal office address MUST BE A STREET ADDRESS)		
		MIAMI FL 33180	
Enter new mailing address, if applicable:		19630 NE 26th AVE	
(Mailing address MAY BE A POST OFFICE	BOX)	MIAMI, FL, 33180	
B. If amending the registered agent and registered agent and/or the new registered of	***	· · · · · · · · · · · · · · · · · · ·	nter the name of the nev
Name of New Registered Agent:	HAGAI KABI	RI	
New Registered Office Address:	19630 NE 26th	AVE	
		Enter Florida street address	
	MIAMI	, Florid	Ia 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.

Muscus Codemi
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	Name	Address	Type of Action
MGR	HAGAI KABIRI	19630 NE 26th AVE	Add
		MIAMI, FL, 33180	□ Remove
			☐ Change
AMBR	IDA ROSENBERG	19630 NE 26th AVE	
		MIAMI, FL, 33180	□ Remove
			Change
MGR	JIMMY MASARWA	16919 NORTH BAY RD BLDG 2	
		APT # 108	■ Remove
		SUNNY ISLES, FL, 33160	Change
	-		D Add
			☐ Remove
			Change
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