## L16000015901

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## **COVER LETTER**

TO:	Registration Sec Division of Cor			<b>₹</b>
SUBJI		EACH SUITES, LLC		
ЗОВЛ		Name of Limi	ted Liability Company	
The en	closed Articles of A	Amendment and fee(s) are subt	nitted for filing.	
Please	return all correspon	ndence concerning this matter t	to the following:	
		ALON VARHA		
			Name of Person	
		ST PETE BEACH SUITES	S, LLC	•
			Firm/Company	
		5160 VAN NUYS BLVD #	<del>/</del> 493	
			Address	
		SHERMAN OAKS, CA 91	403	
			City/State and Zip Code	
		emma@titanglobalgroup.om		
		E-mail address: (t	o be used for future annual report notific	ation)
For fur	ther information co	oncerning this matter, please ca	ill:	
ALON	I VARSHA OR EN	IMA GAMEZ	818 917-8009	
<del></del>	Name of	`Person	at () Area Code Daytime	Telephone Number
Enclos	ed is a check for th	e following amount:		
<b>□</b> \$2	5.00 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**

ST PETE BEACH SUITES, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our recor Liability Company)	<u>rds.</u> )
The Articles of Organization for this Limited Liability Company	were filed on MARCH 4, 2010	6 and assigned
lorida document number L16000045907		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LL	* - EE
Enter new principal offices address, if applicable:		7 7 7 7
Principal office address MUST BE A STREET ADDRESS)		WE NO PLANE
Enter new mailing address, if applicable:	5160 VAN NUYS BLVD	F STATE
Mailing address MAY BE A POST OFFICE BOX)	SUITE 493 ·	A
	SHERMAN OAKS, CA 9140	03
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here		ds, <u>enter the name of th</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	
	Enter r toriau street addr	ess
		lorida
	City	Zip Code

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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	DANIEL TAIBEL	6801 SUNSET WAY	
		ST PETE BEACH, FL 33706	■ Remove
			☐ Change
AMBR	DANIELLE TAIBEL	6801 SUNSET WAY .	_ □ Add
		ST PETE BEACH, FL 33706	■ Remove
			Change
			Add
		<del></del>	Remove
			Change
			□ Add
			□ Remove
			Change
<del></del>			
			□ Remove
			Ghange  Ghange  Add  OF SIAIE  ORIGINATION  Change
			RITE 30 Change

DANIELLE TAIBEL SHOULD NOT BE LISTED AS AN "AMBR"		
DANIELL VAIDLE SHOOLD NOT BE EIGHED AG AIV ANDR		
DANIEL TAIBEL SHOULD BE LISTED ONLY AS A MEMBER OF THE LLC		
DANIEL TAIBEL SHOULD NOT BE LISED AS AN "AMBR"		
THE ONLY MANAGING MEMBER OF ST PETE BEACH SUITES, LLC IS ALON V	ARSHA	
	·•	
	<del></del>	
	(optional)	
ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day. If the date inserted in this block does not meet the applicable statutory filing requirement and seffective date on the Department of State's records.		
	:01 a.m.	on the ea
90th day after the record is filed.		<b>a</b>
90th day after the record is filed.		
goord specifies a delayed effective date, but not an effective time, at 12 90th day after the record is filed.  May 24, 2016.  Signature of a member or authorized representative of a member	SHAP T	

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Filing Fee: \$25.00