

LI 6000055119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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16 APR 13 PM 12:12
TAMPA, FLORIDA

APR 21 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 5, 2016

JASON M LAZAR
215 N FEDERAL HIGHWAY
BOCA RATON, FL 33432

SUBJECT: MELKON PROPERTY MANAGEMENT LLC
Ref. Number: L16000055119

We have received your document for MELKON PROPERTY MANAGEMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 016A00006943

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Melkon Property Management LLC

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:

Jason M. Lazar

Name of Person

Firm/Company

215 N Federal Highway

Address

Boca Raton, FL 33432

City/State and Zip Code

jlazar@investmentslimited.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Lazar

561

392-8920

at (_____) _____

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

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

Melkon Property Management LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2016 APR 13 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 3/17/2016 and assigned
Florida document number L16000055119.

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)

215 N Federal Highway

Boca Raton, FL 33432

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

215 N Federal Highway

Boca Raton, FL 33432

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:

Jason Lazar

New Registered Office Address:

215 N Federal Highway

Enter Florida street address

Boca Raton

City

Florida 33432

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	TERSAKIAN, MELKON	482 SE 17TH TERRACE	<input type="checkbox"/> Add
		DEERFIELD BEACH, FL 33431	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	James H. Batmasian	215 N Federal Highway	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33432	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

FILED
2016 APR 13 PM 4:30
CLERK OF STATE
TALLAHASSEE FLORIDA

2016 APR 13 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 APR 13 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

(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)

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 March 29, 2016

~~Signature of a member or authorized representative of a member~~

James H. Batmasian

Typed or printed name of signee