

L160000 63069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

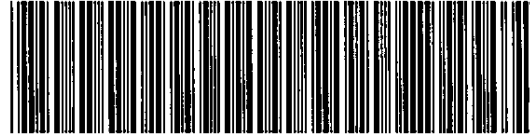
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

AUG 03 2016

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 609 NE 2 AVE hallandale Beach 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:

ori Bilansky

Name of Person

Firm/Company

2036 Nevada city hwy ~~2036~~ #282
Address

grass valley, CA 95945
City/State and Zip Code

Bilibubble@yahoo.co.il
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ori Bilansky
Name of Person

at (530) 446 1070
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

809 NE 2 AVE Hallandale Beach LLC
(Name of the Limited Liability Company as it now appears on our

The Articles of Organization for this Limited Liability Company were filed on March 29, 2016 and assigned Florida document number L16000863069.

Page 1 of 3

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	Moshe Cohen	2675 NE 188 Street	<input type="checkbox"/> Add
		Aventura, FL 33180	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Yosef Biton	2675 NE 188 Street	<input type="checkbox"/> Add
		Aventura, FL 33180	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ori Bilansky	2036 Nevada city hwy #102	<input type="checkbox"/> Add
		grass valley, CA 95945	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

16 APR - 1 PM
FLORIDA SECRETARY OF STATE

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

me, Ori Bilansky changing my address on the articles
The new address is
2036 Nevada city hwy #282, Grass Valley,
CA 95945

16 AUG - 1 AM 11:17
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 7/29/2018, _____.



Signature of a member or authorized representative of a member

Ori Bilansky

Typed or printed name of signee