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TALLAMASSES FLOWS

JUN 1 4 2016 S. YOUNG

COVER LETTER

TO: Registration S Division of Co			
	mercial LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
	ondence concerning this matter	C	
	Dvora Weinreb, Esq.		
		Name of Person	
	Dvora M. Weinreb PA		
		Firm/Company	5 F.
	20283 State Road 7, Suite	400	16 JUH 10 PH 2: 1
		Address	
	Boca Raton, FL 33498		PH
		City/State and Zip Code	· .
	dvora@dwpalaw.com		2
For further information	E-mail address: (concerning this matter, please or	to be used for future annual report notific	cation)
	concerning this matter, please ca		
Dvora Weinreb		954 274-7730 at ()	12 - 10 10 10 10 10 10 10 10 10 10 10 10 10
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)
Regis Divisi	LING ADDRESS: tration Section on of Corporations Box 6327	STREET/COURIE Registration Section Division of Corporat Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Yass Commercial LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability C	ompany were filed on 04/18/2016	and assigned
Florida document number L16000076150		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u>,</u> 50
(Principal office address MUST BE A STREET ADDR	(ESS)	5 []
		O (2)
Enter new mailing address, if applicable:		2
(Mailing address MAY BE A POST OFFICE BOX)		N nei
		12 jm
B. If amending the registered agent and/or registered agent and/or the new registered office add	tered office address on our records, <u>e</u> ress here:	nter the name of the new
Name of New Registered Agent:		<u>-</u> .
New Registered Office Address:		
	Enter Florida street address	
	, Floric	IaZip Code
		EU OVAC

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>	Address	Type of Action
MGR	Samah F. Gadou	122 Dockside Circle	⊒ Add
		Weston, FL 33327	□ Remove
			☐ Change
			□ Add
			☐ Remove
			Change A
			□ Add
			□ Change
			□ Add
			Remove
			☐ Change
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			Change
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			Remove
			∏ Change

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	PH +:
ective date, if other than the date of filing: I effective date is listed, the date must be specific and cannot be prior to date of filing or more than te: If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	90 days after filing.) Pursuant to 605.0
record specifies a delayed effective date, but not an effective time, the 90th day after the record is filed.	at 12:01 a.m. on the earlier
ed,	
~~ ulkhu	

Page 3 of 3

Filing Fee: \$25.00