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COVER LETTER

	Registration Sec Division of Corp					
CHD IEC		AL INVESTMENTS LLC				
SUBJEC	ı:	Name of Lim	ited Liability Company			
The enclose	sed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please retu	arn all correspon	dence concerning this matter	to the following:			
		Marci Rubin, Esq.				
			Name of Person		_	
		Phillips, Cantor, Shalek, R	ubin & Pfister, P.A.			
			Firm/Company		_	
		4000 Hollywood Blvd., Su	ite 500N			
			Address		_	
		Hollywood, Florida 33021				
			City/State and Zip Code		_	
		mrubin@phillipslawyers.co				
		E-mail address: (to be used for future annual report no	otification)		
For furthe	r information co	ncerning this matter, please ca	all:	<u></u>	-1	
Marci Ru	bin		954 966-1820 at ()		2016 N	
	Name of	Person	Area Code Dayti	ime Telephone Numbe	AN IO	
Enclosed	is a check for the	following amount:		- - -	ל ל	["""]
\$25.00	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 É Certific Certifie		

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

Y.A CAPITAL INVESTMENTS LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ______04/28/2016 and assigned Florida document number <u>L160000</u>83876 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." 11900 Biscayne Blvd. Enter new principal offices address, if applicable: Suite 808 (Principal office address MUST BE A STREET ADDRESS) North Miami, FL 33181 11900 Biscayne Blvd. Enter new mailing address, if applicable: Suite 808 (Mailing address MAY BE A POST OFFICE BOX) North Miami, FL 33181 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: New Registered Office Address: Enter Florida street address Florida: City

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	Yossi Amossy	11900 Biscayne Blvd.	
		Suite 808	□ Remove
		North Miami, FL 33181	■ Change
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			Remove
			☐ Change
			□ Add
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n effective date is listed, the date must te: If the date inserted in this blo	be specific and cannot be p	rior to date of filing or	r more than 90 days after	er filing.) Pursuant to 605:02
cument's effective date on the De			ing requirements, th	
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record specifies a delayed	effective date, but	not an effective	e time, at 12:01	a.m.con the earlier
The 90th day after the reco	ord is filed.			51
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ted May 9	all;	•		
ted May 9	Signature of a member or a	uthorized representat	ive of a member	

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Filing Fee: \$25.00