

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FELDMAN & ASSOCIATES

Account Number : I20130000018 Phone : (786)288-5699

Fax Number : (866)856-1462

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

paul@feldmanclosings.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COMMERCIAL EAST, LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

2016 SEP 12 AM 9: 32 18668561462 From: Paul Feldman

Zip Code

COMMERCIAL EAST, LLC	w appears on our records.)
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	w appears on our records.) ompany)
The Articles of Organization for this Limited Liability Company were file	d on 07/22/2016 and assigned
Florida document number L16000137546	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compar	ny," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Muiling address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office add registered agent and/or the new registered office address here:	ress on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
· · · · · · · · · · · · · · · · · · ·	Enter l'Ioridastreet address
	Florida

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.

City

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	SCHILTZ, CHARLES J	122 GOLDEN BEACH DRIVE	
		GOLDEN BEACH, FL 33160	Remove
		122 GOLDEN BEACH DRIVE	Change
MGR SA	SANANES, YANIV	GOLDEN BEACH, FL 33160	Add
			Remove
			☐ Change
		W	
			Remove
			- Companye Ti
			See IT AND
			Remove -
			Change
			□ Add
			☐ Remove
			Change
			□ Add
			☐ Remove
			Change

完成 是

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.

Signature of a member or authorized representative of a member

PAUL FELDMAN, ESQ.

Typed or printed name of signee

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Filing Fee: \$25.00