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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida Greenland, 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:

L. Michael Osman
Name of Person

L. Michael Osman, P.A.
Firm/Company

1474-A West 84 Street
Address

Hialeah, Florida 33014
City/State and Zip Code

LM01474@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

L. Michael Osman at (305) 823-1401
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**

FILED

Florida Greenland, LLC

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

(A Florida Limited Liability Company)

2016 SEP 23 P 13:40

The Articles of Organization for this Limited Liability Company were filed on 08-11-2016 and assigned
Florida document number L 16000150703.

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:

7747 N.W. 146 Street

(Principal office address MUST BE A STREET ADDRESS)

Miami Lakes, Florida 33016

Enter new mailing address, if applicable:

1474-A West 84 Street

(Mailing address MAY BE A POST OFFICE BOX)

Hialeah, Florida 33014

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

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 a pending 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>
Manager	Mitchel Sabina	7767 N.W. 146 Street	<input checked="" type="checkbox"/> Add
		Miami Lakes, florida 33016	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Manager	L. Michael Osman	1474-A West 84 Street	<input checked="" type="checkbox"/> Add
		Hialeah, Florida 33014	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Authorized Representative	Maurice Costa	6843 Main Street #302	<input type="checkbox"/> Add
		Miami Lakes, Florida 33014	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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.

Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

Typed or printed name of signee