

L16000169329

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

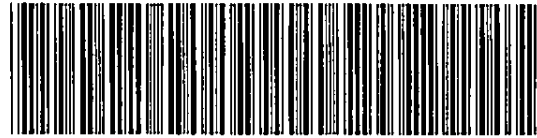
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 SEP -1 14 10:52

D SCOTT
SEP 5 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 11, 2017

SAMI KOHEN
16400 COLLIN AVE #2345
SUNNY ISLES
MIAMI, FL 33160

SUBJECT: 28 EKIM MIAMI LLC
Ref. Number: L16000169329

We have received your document for 28 EKIM MIAMI LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijaux
Regulatory Specialist

Letter Number: 217A00016447

RECEIVED
2017 SEP -1 PM 3:38
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 28 Ekim Miami 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:

Sami Kohen

Name of Person

Firm/Company

16400 Collin Avenue #23-45 Sunny Isles

Address

Miami, FL 33160

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sami Kohen

786 9730077

at (_____) _____

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

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FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

28 Ekim Miami 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 09/09/2016 and assigned
Florida document number L160000169329.

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:

(Principal office address MUST BE A STREET ADDRESS)

16400 Collins Avenue

2345

Miami, FL 33160

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME ABOVE

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:

Sami Kohen

New Registered Office Address:

16400 Collins Avenue #2345

Enter Florida street address

Miami

City

Florida 33160

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.

Sami Kohen

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>	<u>Address</u>	<u>Type of Action</u>
MGR	SAYIN, HAKAN	5750 NW 32ND COURT	<input type="checkbox"/> Add
		MIAMI FL 33142	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BADAK, KASIM	5750 NW 32ND COURT	<input type="checkbox"/> Add
		MIAMI FL 33142	<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
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

MGR , KOHAN, SAMI (PLEASE CORRECT THE LAST NAME 'KOHEN". IT SHOULD READ

KOHEN, SAMI

E. Effective date, if other than the date of filing: 06/23/2017 8/3/2017 **(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 06/23/2017 8/3/2017

Signature of a member or authorized representative of a member

SAMI KOHEN

Typed or printed name of signee