

L16000221107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

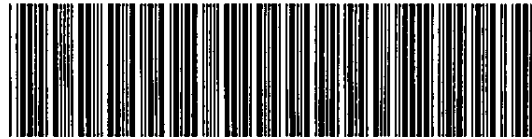
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500293058985

12/09/16--01015--013 **30.00

DEC 12 2016

S. YOUNG

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 DEC -9 PM 12:30

1101 NORTHPOINT, LLC

534 Willow Avenue, Suite 203
P.O. Box 418
Cedarhurst, New York 11516-0418
Tel. #: 516-569-0200
Fax #: 516.569.0629

December 8, 2016

Registration Section
Division of corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Via: Overnight Delivery

Re: Document #L16000221107
1101 Northpoint, LLC
Articles of Amendment to Articles of Organization

To whom it may concern:

Enclosed please find the Articles of Amendment to Articles of Organization form which amends the authorized persons, along with a check in the amount of \$30.00 which represents the fee to file the amendment and receive a certificate of status.

If you have any questions in this regard, you may contact myself or my Chief Financial Officer, Doreen Zampaglione at the phone number shown above.

Sincerely,

1101 Northpoint, LLC



George Brock

Cc: Doreen Zampaglione

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 DEC -9 PM 12:31

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 1101 Northpoint, 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:

George Brock

Name of Person

1101 Northpoint, LLC

Firm/Company

534 Willow Avenue, Suite 203

Address

Cedarhurst, NY 11516

City/State and Zip Code

doreen@libertyequitiesusa.com

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

For further information concerning this matter, please call:

George Brock

516

5690200

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

16 DEC -9 PM 12:31
CLERK OF STATE
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1101 Northpoint, 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 December 6, 2016 and assigned
Florida document number L16000221107

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 DEC -9 PM 12:31

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 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.	Richard Brock	7284 West Palmetto Park Road	<input checked="" type="checkbox"/> Add
		Suite 208S	<input type="checkbox"/> Remove
		Boca Raton, FL 33433	<input type="checkbox"/> Change
MGR	George Brock	7284 West Palmetto Park Road	<input checked="" type="checkbox"/> Add
		Suite 208S	<input type="checkbox"/> Remove
		Boca Raton, FL 33433	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 DEC -9 3PM 12:31

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

FILED
CLERK OF STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (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 _____

Signature of a member or authorized representative of a member

George Brock

Typed or printed name of signee