

617 0000 21237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

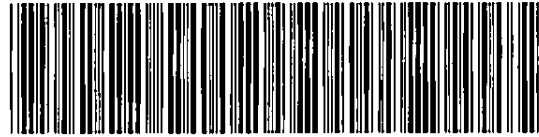
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 DEC -6 AM 7:56

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 5 N Beach Road, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARGO ADLER

Name of Person

LAW OFFICE OF PAUL A. KRASKER, P.A.

Firm/Company

1615 FORUM PLACE, 5TH FLOOR

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

amurphy@kraskerlaw.com

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

For further information concerning this matter, please call:

ANDREA MURPHY 561 515-4722
Name of Person at (Area Code) Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

S N. Beach Bowl, 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 01/26/2017 and assigned
Florida document number L17000021237.

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)

44 MONTGOMERY STREET, SUITE #1520

SAN FRANCISCO, CA 94104

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

44 MONTGOMERY STREET, SUITE #1520

SAN FRANCISCO, CA 94104

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:

PAUL A. KRASKER, ESQ.

New Registered Office Address:

1615 FORUM PLACE, 5TH FLOOR

Enter Florida street address

WEST PALM BEACH

City

Florida

33461

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	Sandra M. Whitman	44 Montgomery Str, #1520	<input checked="" type="checkbox"/> Add
		San Francisco, CA 94104	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	National Safe Harbor Exchanges		<input type="checkbox"/> Add
		60 E. Rio Salado Parkway	<input checked="" type="checkbox"/> Remove
		Tempe, AZ 85281	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

(b) The 90th day after the record is filed.

Dated DECEMBER 1ST, 2017

Sander Whitman

Signature of a member or authorized representative of a member

SANDRA M. WHITMAN

Typed or printed name of signee