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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

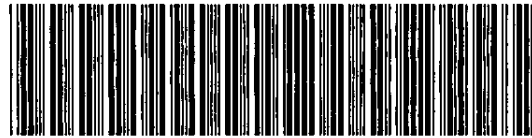
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAR 02 2017
S. YOUNG

FILED
SECRETARY OF STATE
TALLAHASSEE, FL 32304
17 MAR - 1 PM 12:06

FERRO LABELLA & ZUCKER L.L.C.
COUNSELLORS AT LAW

PLEASE REPLY TO N.J. OFFICE

ROCCO J. LABELLA
rlabella@ferrolabella.com

THE LANDMARK BUILDING
27 WARREN STREET, SUITE 201
HACKENSACK, N.J. 07601-5476
(201) 489-9110
FAX (201) 489-5653

1025 WESTCHESTER AVENUE, SUITE 106
WHITE PLAINS, N.Y. 10604-3538
(914) 358-4934
FAX (914) 358-4935

February 28, 2017

Via FedEx

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

Re: Haber South LLC (the "Company")

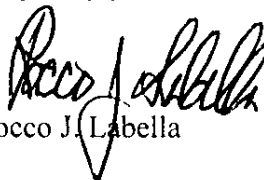
Dear Sir/Madam:

Enclosed for filing are an original and one (1) copy of Articles of Amendment to Articles of Organization (the "Articles") in connection with the above Company. Also enclosed are two copies of the Florida Department of State's Cover Letter and this firm's check in the amount of \$55.00 for payment of the applicable filing fee and certified copy fee.

Kindly file the Articles and return a filing confirmation and certified copy of the "filed" Articles to this office in the envelope provided.

If you any questions please contact me. Thank you.

Very truly yours,


Rocco J. Labella

RJL/cp
Enclosures

FILED
TALLAHASSEE, FLORIDA
FEB 29 2017
17 FEB - 1 PM 12:30

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Haber South 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:

Rocco J. Labella, Esq.

Name of Person

Ferro Labella & Zucker L.L.C.

Firm/Company

27 Warren Street, 2nd Floor

Address

Hackensack, NJ 07601

City/State and Zip Code

mikeh@wwglass.com

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

For further information concerning this matter, please call:

Rocco J. Labella, Esq.

201 489-9110
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

17 MAR - 1 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FL 32301

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

Haber South 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 February 22, 2017 and assigned Florida document number L17000041420.

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)

35 Lady Godiva Drive

New City, NY 10956

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

35 Lady Godiva Drive

New City, NY 10956

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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17 APR - 1 PM 12 06
STATE OF TEXAS
CLERK OF THE COURT
JULIA HANSEN, CLERK

17 MAR - 1 PM 12:00


ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 07-11-2001 BY 60322
17 MAR -1 PM 12:06

(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.

Dated FEBRUARY 28, 2017

 Signature of a member

D. J. LABELLE, AUTHORIZED MEMBER

Signature of a member or authorized representative of a member

ROCCO J. LABELLA, AUTHORIZED MEMBER

Typed or printed name of signee