Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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: (850)617-6383

From:

Account Name : MARK B. GOLDSTEIN, P.A.

Account Number : 120060000077 Phone

: (561)989-9955

Fax Number

: (561)989-9966

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COBRO 4135, LLC

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Corporate Filing Menu

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COVER LETTER

	on Section f Corporations		
	10 4135, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articl	es of Amendment and fec(s) are sub-	mitted for filing.	
Please return all cor	respondence concerning this matter	to the following:	
	Mark B. Goldstein		
		Name of Person	
	Mark B. Goldstein, P.A.		
Firm/Company			
	2700 N. Military Trail, Ste	, 130	
		Address	
	Boca Raton, FL 33431		
		City/State and Zip Code	
	mbg@bizavlaw.com		
		to be used for future annual report notif	fication)
For further informa	tion concerning this matter, please or	all:	
Mark B. Goldstein		561 989-9955	
'n	ume of Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check	for the following amount:		
■ \$25,00 Filing F	ce S30.00 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)
T.	IAILING ADDRESS:	STREET/COURI	ER ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COBRO 4135, LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 3/14	/2017 and assigned
Florida document number L17000055910		
Florida document number	ب.	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company her	e:
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the des	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR.	ESS)	
Enter new mailing address, if applicable:		
-		
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr Name of New Registered Agent:		our records, enter the name of the r
New Registered Office Address:	Fater Florid	da street address
	251000 1 115110	
	C'a	, FloridaZip Code
	City	Zip Cnaz
New Registered Agent's Signature, if changing Registered	l Agent:	
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete performance of n ent as provided for in Cl	ny duties, and I am familiar with and hapter 605, F.S. Or, if this document is
	If Changing Registered Age	nt, Signature of New Registered Agent
	,	FO A
	Page 1 of 3	777

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> Хаще</u>	Address	Type of Action
MOR	Mark B. Goldstein	2700 N. Military Trail	D Add
		Suite 130	■ Remove
		Boca Raton, FL 33431	□ Change
			□ Remove
			_D Change
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