11700074747

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Consideration of the Conference
Special Instructions to Filing Officer:

Office Use Only



000301490820

07/18/17--01017--016 **25.00

FILED
17 JUL 18 PH 3: 05
DIVISION OF CORE CANTIONS

O CHMMONS JUL 2 0 2017

COVER LETTER

Div	ision of Corp	porations		
211D 18270.		BLUMBERG LLC		
SUBJECT			ted Liability Company	
The enclosed	l Articles of A	Amendment and fee(s) are subt	nitted for filing.	
Please return	all correspor	ndence concerning this matter t	to the following:	
		DANY ABRAHAM		
			Name of Person	
		KSDT & COMPANY		
			Firm/Company	
		1625 N COMMERCE PKV	WY SUITE 15	
		-	Address	
		WESTON, FL 33326		
		JKUSHNER@KSR -CPA.C	City/State and Zip Code	
		-	to be used for future annual report not	ilication)
For further in	nformation co	oncerning this matter, please ca	all:	
DANY ABI	RAHAM		305 at () 670-3370 Area Code Daytin	
	Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is a	i check for th	e 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:

TO:

Registration Section

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

MYERS & BLUMBERG LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lim	ompany as it now appears on our records.) itted Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number L17000076747	pany were filed on 04/05/2017	and assigned
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	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES.	<u>s)</u>	<u> </u>
Enter new mailing address, if applicable:		17 JUL 18 PH 3: 05
Mailing address MAY BE A POST OFFICE BOX)		
		7.
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ter the name of the nev
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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JONATHAN KUSHNER	1625 N COMMERCE PKWY	
		SUITE 315	■ Remove
		WESTON, FL 3326	Change
MGR	RON ABRAHAM	1625 N COMMERCE PKWY	
		SUITE 315	<u> </u>
		WESTON, FL 33326	☐ Change
			FILED Wilsion Children St. 05 FILED
			Change 3
			DATE S
			Remove
			Change
			Add
			☐ Remove
			Change
			□ Add
			□ Remove
			□ Change

						181	
	·	·					
				<u> </u>			
							
						·	
				,			
						. <u>.</u>	
						9	1
				-	 .		7 502
	<u></u>					DIVISION OF CORE CITATION	- 5 7
		<u></u>					- 8 T
						다. 다.	PH 3: 05
						7	
							£1—
Note: If the d	ate inserted in the	his block does r	filing:	cable statutory ti	(o) r more than 90 days a ling requirements.	ptional) after filing.) Pursuant to this date will not be	o 605.0207 (1 e listed as th
	pecifies a del day after the			ot an effective	e time, at 12:0	1 a.m. on the e	arlier of:
Dated JULY	·11		2017	·			
					ive of a member		
	/	Signature	of a member or auth	orized representat	ive of a member		_

Page 3 of 3

Filing Fee: \$25.00