L17000119587

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FILLU 2017 JUN 13 PM 2: 06 SECRETARY OF STATE AND AHASSEE, FLORID

K. SALY JUN 1 4 2017

COVER LETTER

TO:	Registration Section ' ' Division of Corporations	
SUBJ	Name of Limited Liability Company	
The e	closed Articles of Amendment and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	TRANK CASTELLANO Name of Person	
	Firm/Company	·
	2116 NEW AZORA RD.	
	Address SPRING HILL FL 34608 City/State and Zip Code AZRAELICHOLDINGS @ GMAIL. COM	
	City/State and Zip Code AZRAELICHOLDINGS @ GMAIL COM E-mail address: (to be used for future annual report notification)	
For fu	ther information concerning this matter, please call:	
	PANK CASTELLANO at (352) 650-7890	
	Name of Person Area Code Daytime Telephone Number	
Enclo	ed is a check for the following amount:	
□ \$:	5.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Solution Filing Fee Set Certified Copy (additional copy is enclosed) 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

FILED
2017 WH 13 PM 2: 08
TALLAHASSEE, FLORIDA

AZRAELIC HOLDINGS, LLC

ability Company as it now appears on our records.) lorida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number L17000119587 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 "LLC." 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) 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 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

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> Name <u>Address</u> **Type of Action** 134 LINMOUTH RD. XADA AMBR ANTHONY CASTELLAND MALVERNE, NY 11565 Remove ☐ Change AMBR CHRISTOPHER CASTELLAND 207-18 42ND AVE. 2ND FLOOR BAYSIDE, NY 11361 ☐ Change □ Add □ Remove ☐ Change ☐ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change

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ectiv	we date, if other than the date of filing: $\frac{6/1/2017}{(optional)}$
n effe	ctive 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 605.020
	if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as int's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
ted_	JUNE 8, 2017.
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00