117000133125

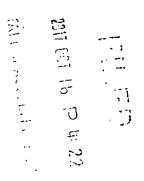
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 2, 2017

CORY BLANK 315 NE 3RD AVE CONDO 1505 FORT LAUDERDALE, FL 33301

SUBJECT: BLANK GROUP, LLC Ref. Number: L17000133125

We have received your document for BLANK GROUP, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FL CORP, but your entity is a FL LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 117A00019814

(I) (IC) 1.5 FR 18: 2.0

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJ	ECT: BLANK GROUP LLC Name of Limited Liability Company
The er	nclosed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	CORY BLANK Name of Person
	BLANK GROLP LLC
	315 NE 3rd AUE condo/505
	FORT Lauderdele FL 3330/
	City/State and Zip Code CORYB-1-ANK 09 @ JAh00 . (@M) E-mail address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
	DON Blank at (954) 340 4418 Area Code Daytime Telephone Number
Enclos	sed is a check for the following amount:
□ \$2	25.00 Filing Fee

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

(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appears on our liability Company) /	records.)		
The Articles of Organization for this Limited Lia Florida document number	bility Company	a/a	117	and assigned	
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of	the limited liabi	ility company here:			
The new name must be distinguishable and contain the wo	rds "Limited Liabil	ity Company," the designation	in "LLC" or the abb	reviation "L.L.C."	_
Enter new principal offices address, if applica	ble:				_
(Principal office address MUST BE A STREET	"ADDRESS)				_
					_
Enter new mailing address, if applicable:				·	_
(Mailing address MAY BE A POST OFFICE B	<u>RON)</u>			· 1	_
D. M		· · · · · · · · · · · · · · · · · · ·			_
B. If amending the registered agent and/or the new registered off			ecorus, <u>enter t</u>	ne hame of the	new
Name of New Registered Agent:	DON	BLANK	-	ਹ ਹ ਵ	_
New Registered Office Address:	5351/	UW 51 AVE Enter Florida stree	Laddrage	13 13	_
	Cocor	vit Cheek	Florida <u>F</u>	L 330	2
New Registered Agent's Signature, if changing R	onistored Aponts	City		Zip Code	
Act registered Agent's Signature, it changing to	egistereu 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 Type of Action Rubin Jacob 23344 Carolwood fine Add

Bulder #5

Bica Rator FL Char **Address Title** Name ☐ Change □ Add ☐ Remove □ Change □ Add ☐ Remove ☐ Change □ Add □.Remove ☐ Change S _□ Remove ☐ Change □ Add ☐ Remove ☐ Change

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record specifies a delayed effect the 90th day after the record is f	filing:) to 605.02 be listed :
record specifies a delayed effect. The 90th day after the record is f	filing: 9//7 (optional) fice and cannot be prior to date of filing or more than 90 days after filing.) Pursuant in our meet the applicable statutory filing requirements, this date will not not of State's records. Five date, but not an effective time, at 12:01 a.m. on the filed. President) to 605.02 be listed :
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Page 3 of 3

Filing Fee: \$25.00