

U7000162641

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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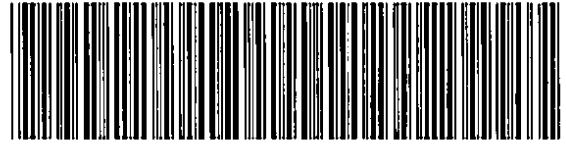
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*and New York*

July 31, 2018

**Via FedEx**

Department of State  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, Florida 32314

**Re:** *Articles of Amendment*  
Filing No. 1.17000162641

Dear Sir or Madam:

Enclosed please find the Articles of Amendment for FC Shores, LLC (Florida Document No. 1.17000162641) and check number 5384 in the amount of twenty five dollars (\$25.00).

Please do not hesitate to contact me should you require anything further in this regard.

Respectfully Submitted,

*s/ Jason Goldstein*  
Jason Goldstein

Enclosures

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** FC Shores, 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:

Jason Goldstein

\_\_\_\_\_  
Name of Person

Richards Goldstein, LLP

\_\_\_\_\_  
Firm/Company

55 Miracle Mile, Ste. 310

\_\_\_\_\_  
Address

Coral Gables, FL 33134

\_\_\_\_\_  
City/State and Zip Code

jgoldstein@rgattorneys.com

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

For further information concerning this matter, please call:

Jason Goldstein

305

448-2228

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



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>
AMBR	BARRINGTON IRVING SECURI	14850 NW 44TH COURT	<input type="checkbox"/> Add
		SUITE 203	<input checked="" type="checkbox"/> Remove
		OPA LOCKA, FL 33054	<input type="checkbox"/> Change
AMBR	THE FLYING CLASSROOM,LLC	14850 NW 44TH COURT	<input checked="" type="checkbox"/> Add
		SUITE 203	<input type="checkbox"/> Remove
		OPA LOCKA, FL 33054	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 July 30, 2018

Signature of a member or authorized representative of a member

Jason Goldstein

Typed or printed name of signee