117000 208355

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	legistration Se Division of Cor			
SUBJECT	Bickel 4, L	LC		
SUBJECT	· <u></u>			
The enclos	sed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please retu	ırn all correspo	ndence concerning this matter	to the following:	
		Justin Zeig, Esq.		
			Name of Person	
		Zeig Law Firm, PLLC		
			Firm/Company	
		3475 Sheridan Street, Suite	2 310	
			Address	
		Hollywood, FL 33021		
		Justin@zeiglawfirm.com	City/State and Zip Code	
		E-mail address: ()	to be used for future annual report notification	ation)
For further	r information c	oncerning this matter, please ca	ail:	
Justin Ze	ig, Esq.		754 2173084 at ()	
_	Name o	f Person	Area Code Daytime T	Celephone Number
Enclosed i	s a check for th	ne following amount:		
\$25.00) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Fiting 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 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

Bickel 4, LLC			
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records Liability Company)	<u>.</u>)	
The Articles of Organization for this Limited Liability Company Florida document number L17000208355	were filed on 10/09/2017		_ and assigned
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC"	or the abbres	viation "L.L.C."
Enter new principal offices address, if applicable:		ě	2(
Principal office address MUST BE A STREET ADDRESS))19(
			— mrs
Inter new mailing address, if applicable:		įт.	P D
Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
Mining dadress MAT BE AT OST OTTICE BOX	·	 -	10 -
3. If amending the registered agent and/or registered or egistered agent and/or the new registered office address her		, enter the	name of th
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Flo	rida	
	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, 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>	Address	Type of Action
Membe	Bickelim Family Revocable Trust	19604 Dinner Key Drive, Boca Raton, FL 33498	
			□ Remove
			Change
	·		Add
			□ Remove
			Change
			Add
			Remove
			□ Change
			□ Add
			Remove
			Change
			□ Add
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			Change
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			□ Remove
			Change

If amending any other information	ion, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
 	
Effective date, if other than the d (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Dep	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 ck does not meet the applicable statutory filing requirements, this date will not be listed
the record specifies a delayed of the second	effective date, but not an effective time, at 12:01 a.m. on the earlier rd is filed.
October 10th	2019
	Man and a second
S	Signature of a member or authorized representative of a member
Ronen Bickel	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00