

8/27/2018

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : GILMAN CIOCTA INC.
Account Number : I20120000051
Phone : (305)937-7773
Fax Number : (815)301-2897

2018 AUG 27 AM 8:31

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: madya.usovich@gtax.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ML 18 LLC

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T. CLINE

AUG 28 2018

EXAMINER

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Corporate Filing Menu

Help

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ML 18 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on October 18, 2017 and assigned
Florida document number L17000217399.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3720 N 53RD AVE

HOLLYWOOD, FL 33021

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3720 N 53RD AVE

HOLLYWOOD, FL 33021

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: N/A

New Registered Office Address: 3720 N 53RD AVE

Enter Florida street address

HOLLYWOOD, Florida 33021
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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Moshe Levy	5140 SW 40 th Ave. Apt. 2-C	<input type="checkbox"/> Add
		Ft. Lauderdale, FL 33314	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Moshe Levy	3720 N 53 rd Ave.	<input checked="" type="checkbox"/> Add
		Hollywood, FL 33021	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change


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2-20

7-10 PUG 27 AM 8-31

(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)

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.


Signature of a member or authorized representative of a member

Typed or printed name of signer