48000027218

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200322154182

12/20/18--01018--012 **25.00



Anund

JAN 0 9 2019 I ALBRITTON

COVER LETTER

TO:

TO:	Registration Se Division of Cor				
eno my		GROUP L'ELC			
SUBJEC	.1:	Name of Lim	ited Liability Company		
The anal	Division of Corporations CARMEL GROUP I LLC				
Please re	turn all correspo	indence concerning this matter	to the following:		
		DANY ABRAHAM			
			Name of Person		
		KSDT & COMPANY			
			Firm/Company		
	1625 N COMMERCE PKWY SUITE 315				
	Address				
		WESTON FL 33326			
			•		
		-		lication)	
For furth	er information c				
			305 607-3370		
	Name o	f Person	at () Area Code Daytim	e Telephone Number	
Enclosed	l is a check for th	ne following amount:			
⊟ \$25.	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	
	Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURI Registration Section Division of Corpor Clifton Building	ก	

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20/80EC 20 PH 5: 25

CARMEL GROUP LILEC

(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 01/30/2018	and assigned
Florida document number L18000027218		
This amendment is submitted to amend the following:		
his amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: the new name must be distinguishable and contain the words "Lamued Liability Company," the designation "LLC" or the abbreviation "LLC" Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOS) 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 stress address		
The new name must be distinguishable and contain the words "Lu	mited 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 ADD	<u>PRESS)</u>	
Enter new mailing address, if applicable:		
(Stuning address SIAT BE AT 1031 OF FICE DOLY	<u>.</u>	··· - · - · - · · · · · · · · · · · · ·
		enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Flor	
	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>	Name	<u>Address</u>	Type of Action
MGR	PAVEL ZISKIN	1625 N COMMERCE PKWY	■ Add
		SUTTE 315	
		WESTON FL 33326	□ Remove
			Change
MGR	LIMOR HEPNER	1625 N COMMERCE PKWY	Add
		SUITE 315	≡ Remove
		WESTON FL 33326	
MGR	BOAZ EDELMAN	1625 N COMMERCE PKWY	U Change
			Add
		SUITE 315	<u>≡</u> Remove
		WESTON FL 33326	☐ Change
MGR	JONATHAN KUSHNER	1625 N COMMERCE PKWY	Add
		SUITE 315	
		WESTON FL 33326	■ Remove
			☐ Change
MGR	BEN MATITYAHU	1625 N COMMERCE PKWY	□ Add
		SUITE 315	■ Remove
		WESTON FI. 33326	= Remove
			□ Change
			□ Remove

					_
					-
					-
					-
					-
	•				_
	··-··				-
					_
					_
					_
					_
					_
					-
					_
			•••		_
ective date, if other than the effective date is listed, the date in	e date of filing:	the evice to date of tiling	(or	otional)	IS 0.20
te: If the date inserted in this orient's effective date on the	block does not meet the	e applicable statutory	filing requirements, t	his date will not be list	ted a
record specifies a delayo he 90th day after the re		but not an effecti	ive time, at 12:0.	La.m. on the earli	ier c
	201	s / /			
ed NOV-26		//·			
ed NOV-26	· 201				
ed <u>NOV-26</u>	Signature of a member	o authorized represent	tative of a member		

Page 3 of 3

Filing Fee: \$25.00