0033773

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	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
	(Business Entity Name)
	(Document Number)
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	pecial Instructions to Filing Officer:
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		COVER LETTER	
TO: Registration Se			
Division of Cor			
4020 NHD SUBJECT:			
	Name of Limi	ted Liability Company	
The enclosed Articles of .	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	Justin Zeig		
		Name of Person	
	Zeig Law Firm, LLC		
	··	Firm/Company	
	3475 Sheridan Street, Suite	310	
		Address	
	Hollywood, FL 33021		
	ilan6 3@hotmail.com	City/State and Zip Code	
	-	o be used for future annual report notifi	cation)
For further information co	oncerning this matter, please ca	11:	
Ilan Shaltiel		954 907-9912 at ()	
Name of) Person		Telephone Number
Enclosed is a check for the second se	■ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions tter Circle

		ARTICLES OF A TO ARTICLES OF OI OF	RGANIZATION	
	4020 NHD LLC (Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on ou bility Company)	records.)
The	Articles of Organization for	this Limited Liability Company w	rere filed on <u>02/06/201</u>	and assigned
Fip	ida document number L180	00033773		
Thi	s amendment is submitted to	amend the following:		
A]]f amending name, <u>enter t</u> 	he new name of the limited liabili	ty company here:	
The	new name must be distinguishabl	and contain the words "Limited Liability	y Company," the designati	on "LLC" or the abbreviation "L.L.C."
En	er new principal offices ad	dress, if applicable:		18
		T BE A STREET ADDRESS)		HAR HAR
Eņ	ter new mailing address, if	applicable:		ASSEE, FLOR
<u>M</u>	<u>ailing address MAY BE A F</u> I	<u>OST OFFICE BOX)</u>	······	
				· · · · · · · · · · · · · · · · · · ·
B. reg		ed agent and/or registered offi w registered office address here:	ce address on our	ecords, <u>enter the name of the new</u>
1	Name of New Registe	ed Agent:		
	New Registered Offic	Address:		
			Enter Florida stre	t address
				Florida Zip Code
			City	Zip Code
I ha pro acc bei	reby accept the appointme visions of all statutes relations upt the obligations of my p	ive to the proper and complete p osition as registered agent as pr change in the registered office a writing of this change.	erformance of my du ovided for in Chapte ddress, I hereby con, ing Registered Agent, <u>Si</u> g	r 605, F.S. Or, if this document is

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added on removed from our records

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Rinat Shaltiel	4720 Sarazen Drive	🔜 Add
		Hollywood, FE 33021	C Remove
		<u> </u>	Change
			Add
			Change
			🖸 Add
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		<u> </u>	C Remove
			Change
			🖸 Add
			C Remove
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			🖸 Add
			Change
		Page 2 of 3	

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D	16	anding any other infly	rmation, enter change(s) here: (Attach additional sheets, if necessary.)	
		iending any other into	rmation, enter change(s) here: (Attach additional sneets, if necessary.)	
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£.,	(II an ei	tive date, if other than flective 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)
			is block does not meet the applicable statutory filing requirements, this date will not be liste the Department of State's records.	d as the
	the re	ecord specifies a dela	yed effective date, but not an effective time, at 12:01 a.m. on the earlie	r of:
(b	The	e 90th day after the	record is filed.	
		March 14	2018	
	Dated	1	······································	
		. Ali	n, tulla	
1		<u>_</u>	Signature of a member or authorized representative of a member	
,		llan Shaltiel		
i			Typed or printed name of signee	
			Page 3 of 3	
			Filing Fee: \$25.00	