41786

(Requestor's Name)	
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(Document Number)	
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COVER LETTER

TO: Registration S Division of Co			
3310 EUSUBJECT:	IZABETH LLC		
SUBJECT.		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	GREG HERSKOWITZ		
		Name of Person	
	THE HERSKOWITZ LAV	W FIRM	
		Firm/Company	
	9100 S. DADELAND BL	VD. SUITE 908	
		Address	
	MIAMI, FLORIDA 3315	6	
		City/State and Zip Code	
	greg@hlfmiami.com		
For further information c	E-mail address: (concerning this matter, please ca	to be used for future annual report notif	ication)
GREG HERSKOWITZ		305 423-1250	
Name o	of Person	at ()	Telephone Number
Enclosed is a check for t	he 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3310 ELIZABETH LLC			
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	y as it now appears on our records.) ability Company)	-	
The Articles of Organization for this Limited Liability Company w Florida document numberL18000041786	vere filed on <u>02/15/2018</u>	and assigned	i
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ity company here:		
The new name must be distinguishable and contain the words "Limited Liability	y Company "the designation "LLC" or the abbraries	Mion "L. L. C."	
Enter new principal offices address, if applicable:	· -	ation E.D.C.	•
(Principal office address MUST BE A STREET ADDRESS)		18 JE	<u>ਤ</u>
			P F
Enter new mailing address, if applicable:		3 CORP	ΣΕ΄ 20 ε΄.
(Mailing address MAY BE A POST OFFICE BOX)		Ω. A.	<u>, </u>
-			". .'
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	ce address on our records, enter the	name of th	e new
Name of New Registered Agent:		_	
New Registered Office Address:	-		
	Enter Florida street address		

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.

City

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
MGR	B AND B GROVE PROPERTIES	2601 NE 2ND AVENUE	■ Add
		MIAMI, FL 33137	
			☐ Change
MGR	GREG HERSKOWITZ, ESQ.	9100 S. DADELAND BLVD.	
		SUITE 908	■ Remove
		MIAMI, FL 33156	
			
			Remove
			☐ Change
			□ Remove
			Change
			Add
			☐ Remove
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fective date, if other than the date in effective date is listed, the date must be st	of filing:		(optio	onal)		
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cument's effective date on the Departi	nent of State's recor	ds.				
record specifies a delayed effe The 90th day after the record i	ective date, but s filed	not an effective	time, at 12:01 a	.m. on th	e earl	lier
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