Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC. Account Number : 915350000353

Phone : (800)22) 72972. Fax Number : (858)697-9256

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

Email Address:

LLC AMND/RESTATE/CORRECTIOR M/MG RESIGN SIGNTALK FUORIDA, ELC

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Electronic Filing Menu Corporate Filing Menu

MAR 1 4 2018

Help Y SULKER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SIGNTALK FLO	•
(Name of the Limited Liability Compan (A Florida Limited Li	y as It now appears on our records.) solity Company)
The Articles of Organization for this Limited Liability Company v Florida document number L18000057122	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil.	ty company here:
The new name must be distinguishable and contain the words "Limited Liabilit	Compar. ;," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	14 East, Washington Street, Orlando, FL 32801
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	14 East 'Washington Street, Orlando, FL 32801
(Mailing address MAY BE A POST OFFICE BOX)	<u>N</u>
B. If amending the registered agent and/or registered office address here: Name of New Registered Agent:	tee address on our records, enter the maine on the new
	1
New Registered Office Address:	Enter Florida street address Florida Zip Code
and the second second second	Chy .
New Registered Agent's Signature, if changing Registered Agent:	to the same to assume the same
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformence of my duties, and I am familiar wan and or object to be obj
if Chang	ing Regis wed Agent, Signature of New Registered Agent

Page 1 of 3

IGR = M	lanager Authorized Member	·	
<u> </u>	Name	Address	Type of Action
AMBR	MICHELLE ZAHTZ	4101 Pine Tree Orive	
		Miami Beach, FL 33140	□ Remove
		,	☐ Change
MBR	ARI GELIEBTER	4101 Pine Tree Drive	D Add
	Miami Beach, FL 33140	☐ Remove	
			☐ Change
AMBR	ISRAEL GELIEBTER	4101 Pine Tree Drive	□ Add
		Miami Beach, FL 33140	☐ Remove
			■ Change
MBR	PHILIP GELIEBTER	4101 Pine Tree Drive	□ Add
		Miami Beach, Fl. 33140	□ Remove
			■ Change
			:
			Ghange 3
			
			Remore 9
			☐ Change

	\$	
If amending any other information, enter change(s) here:	(Attach additional sheets, if nevessary.)	
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to oute: If the date inserted in this block does not meet the applicable poument's effective date on the Department of State's records.	(optional) date of filing or more than 90 days after filing.) Pursuant to 60 e tratutory filing requirements, this date will not be list	5.0207 (3)(b) ted as the
e record specifies a delayed effective date, but not a The 90th day after the record is filed.	in effective time, at 12:01 a.m. on the earli	er of:
ated March 13 2018	· · · · · · · · · · · · · · · · · · ·	
Signature of a inember or authorize	ed representative of a member	
Typed or printed n	aine of signee	
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Filing Fee: \$25.00