

L18000 230 215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

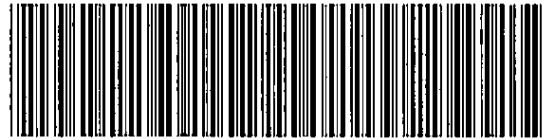
(Business Entity Name)

(Document Number)

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Amend/Name
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AUG 05 2019
I ALBRITTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ABERGEL INVESTMENTS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRIAN ABERGEL

Name of Person

ABERGEL INVESTMENTS LLC

Firm/Company

1688 MERIDIAN AVE STE 440

Address

MIAMI BEACH, FL 33139

City/State and Zip Code

BRIAN@WAPLAWGROUP.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRIAN ABERGEL

305 330-6928
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

ABERGEL INVESTMENTS 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 09/27/2018 and assigned
Florida document number L18000230215

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ABERGEL INVESTMENTS, LLC

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:

1688 MERIDIAN AVE STE 440

(Principal office address MUST BE A STREET ADDRESS)

MIAMI BEACH, FL 33139

Enter new mailing address, if applicable:

1688 MERIDIAN AVE STE 440

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI BEACH, FL 33139

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:

WEINKLE ABERGEL LAW GROUP LLC

New Registered Office Address:

1688 MERIDIAN AVE STE 440

Enter Florida street address

MIAMI BEACH

City

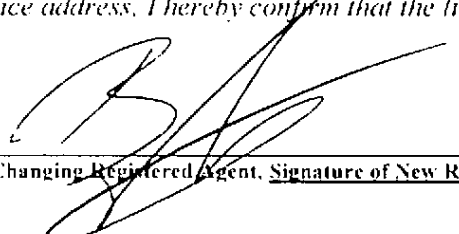
Florida

33139

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>
MGR	BRIAN ABERGEL	1688 MERIDIAN AVE STE 440	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33139	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	KEVIN ABERGEL	325 SOUTH BISCAYNE BLVD UNIT 4222	<input type="checkbox"/> Add
		MIAMI, FL 33131	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DAVID ABERGEL	325 SOUTH BISCAYNE BLVD UNIT 4222	<input type="checkbox"/> Add
		MIAMI, FL 33131	<input checked="" 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

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

[illegible]

E. Effective date, if other than the date of filing: 07/24/2019 (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated JULY 24 2019

Signature of a member or authorized representative of a member

BRIAN ABERGEL

Typed or printed name of signee