

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

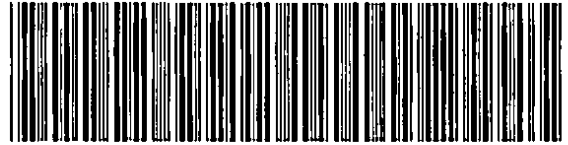
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SHERIFF'S OFFICE
CLERK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRUSHERS RECYCLING 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:

YASMIN LOPEZ

Name of Person

MY TAX CONSULTANT GROUP

Firm/Company

2942 SW 174TH AVE

Address

MIRAMAR, FL 33029

City/State and Zip Code

yasminlopez@mytaxconsultantgroup.com

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

For further information concerning this matter, please call:

YASMIN LOPEZ

786

247-5668

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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CLERK OF COURT
TALLAHASSEE, FL

2021 DEC 13 AM 9:18
SECRETARY OF STATE
RECEIVED

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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>
Chairman	Samuel Benarroch Glijenshi	2610 NE 213TH ST AVENTURA, FL 33180	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
V. C	MARK GHELMAN ZIMILIS	2313 SW 49TH ST HOLLYWOOD, FL 33312	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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

BENARROCH GLIJENSHI, SAMUEL AS CHAIRMAN OWNS 51% OF SHARES

GHELMAN ZIMILIS, MARK AS VICE CHAIRMAN OWNS 49% OF SHARES

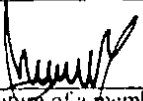
E. Effective date, if other than the date of filing: 11/12/2021 (optional)

(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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated November 12th, 2021


Signature of a member or authorized representative of a member

SAMUEL BENARROCH GLIJENSHI

Typed or printed name of signee