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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : COMITER & SINGER, LLP
Account Number : I20000000085
Phone : (561)626-4742
Fax Number : (561)626-4742

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

Email Address: mfrid@comitersinger.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
M RAVIKOFF ASSOCIATES HOLDINGS, LLC**

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M RAVIKOFF ASSOCIATES HOLDINGS, 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:

Andrew R. Comiter, Esq.

Name of Person

Comiter, Singer, Baseman & Braun, LLP

Firm/Company

3801 PGA Boulevard, Suite 604

Address

Palm Beach Gardens, FL 33410

City/State and Zip Code

acomiter@comitersinger.com

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

For further information concerning this matter, please call:

Andrew R. Comiter, Esq. at 561 626-2101
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
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(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
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|---|--|---|--|

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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

M RAVIKOFF ASSOCIATES HOLDINGS, LLC

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

S. LIM, SECRETARY
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 06/19/2019 and assigned
Florida document number L19000162095.

This amendment is submitted to amend the following:

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

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:

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

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:

New Registered Office Address:

Enter Florida street address

City, Florida 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

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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	Marvin Ravikoff	8462 Hawks Gully Avenue	<input type="checkbox"/> Add
		Delray Beach, FL 33446	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Norma Ravikoff	8462 Hawks Gully Avenue	<input type="checkbox"/> Add
		Delray Beach, FL 33446	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ravikoff Property Management Company, LLC	8462 Hawks Gully Avenue	<input checked="" type="checkbox"/> Add
		Delray Beach, FL 33446	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is filed, the date must be later than the date of filing.)

(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

10/15/2019
mm Reiff

Signature of a member or authorized representative of a member

Marvin Ravikoff

Typed or printed name of signee

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Filing Fee: \$25.00

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