

L19 000 292127

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

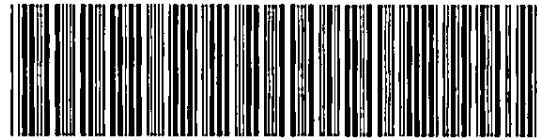
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 600-205 PIP, 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:

2011 OCT -4 AM 8:13

RICHARD LEVIN

Name of Person

605-205 PIP, LLC.

Firm/Company

21355 E. DIXIE HIGHWAY SUITE 102

Address

AVENTURA, FL. 33180

City/State and Zip Code

ALEX@EXE11.COM

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

For further information concerning this matter, please call:

ALEXANDER BERKOVICH

Name of Person

at (954) 448-1919

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 &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

600-205 PIP, 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 11/26/2019 and assigned  
Florida document number L19000292127.

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: GARY S. ROSNER, P.A.

New Registered Office Address: 5850 CORAL RIDGE DRIVE SUITE 201

*Enter Florida street address*

CORAL SPRINGS, Florida 33076

*City*

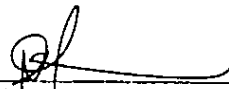
*Zip Code*

**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.*

Gary S. Rosner

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>
AMBR	SHLAEN, ALEKSANDR	1124 N.W. 35TH AVE	<input type="checkbox"/> Add
		CAMAS, WA, 98607	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	EXECUTIVE ENTERPRISES LLC	1348 E HILLSBORO BLVD. DEERFIELD BEACH, FL 33441	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RICHARD LEVIN		<input type="checkbox"/> Add
		21355 E. DIXIE HIGHWAY SUITE 102 AVENTURA, FL 33180	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	PIP STREET HOLDINGS LLC	21355 E. DIXIE HIGHWAY SUITE 102 AVENTURA, FL 33180	<input checked="" 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

