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Certified Copies	Certificates of	Status
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S.C.

COVER LETTER

TO: Registration So Division of Cor			
SUBJECT:	Q10 Mazel Name of Lim	Tov Estate LLC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Raymond	de Charlier Name of Person	-
		Firm/Company	-
	3661	W. Forge Rd	-
	\mathcal{D}^{α}	City/State and Zip Code	-
	E-mail address: (to be used for future annual report notification)	
For further information of	concerning this matter, please ca	all:	
Raymonde (Charlier of Person	at (954) 560-0232 Area Code Daytime Telephone Number	r
Enclosed is a check for t	he following amount:		
S25.00 Filing Fee	☑ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ite of Status & (3) I Copy Saclosed)
			MAR 3
Mailing Addre		Street Address:	. 7.7
Registration		Registration Section	
Division of C P.O. Box 633		Division of Corporations The Centre of Tallahassee	± 5
Tallahassee,		2415 N. Monroe Street, Suite 8	
		Tallahassee, FL 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

210 Mazel Tov Estate 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 _0/10/1202 and assigned
Florida document number 121000 /2/7/
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:
F . 11 1 . 01 ~
Name of New Registered Agent: LTC H. Light Esg.
New Registered Office Address: New Registered Office Address: Sol Jamas Ra Ste 1240 Enter Florida street address:
Boca Raton, Florida 331,31
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 documents

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited ability

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

57

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>	Name	·	Type of Action
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			□Change
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MGR	Didier Desconteans		□Add
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