

122 0000 37192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FL

A. BRUCE
MAR 11 2027

VALUABLE COLLECTABLES LLC

2101 NE 197TH TERRACE

MIAMI, FL 33179

Tel : (305) 546-334

Email : rreh@msn.com

Florida Department Of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

March 5, 2022

Re : Valuable Collectibles LLC

Ref Number : L22000037192

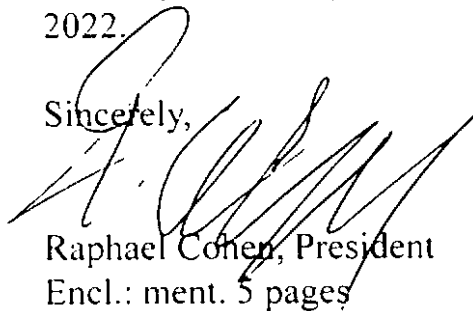
Dear Sirs:

Please find enclosed the following documentation:

- Copy of your February 25, 2022 letter.
- Cover letter duly completed. (1 page)
- Articles Of Amendment To Articles Of Organization Of Valuable Collectibles LLC, duly completed and signed. (3 pages)

Our bank records indicate that our \$52.50 check # 356 submitted with our February 13, 2022 previous filing, was paid to your office on February 22, 2022.

Sincerely,



Raphael Cohen, President
Encl.: ment. 5 pages

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TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 25, 2022

RAPHAEL COHEN
2101 NE 197TH TERRACE
MIAMI, FL 33179

SUBJECT: VALUABLE COLLECTIBLES LLC
Ref. Number: L22000037192

We have received your document for VALUABLE COLLECTIBLES LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Deborah Bruce
Corporate Records Supervisor II

Letter Number: 922A0000465

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TALLAHASSEE, FL

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VALUABLE COLLECTIBLES 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:

RAPHAEL COHEN

Name of Person

VALUABLE COLLECTIBLES LLC

Firm/Company

2101 NE 197TH TERRACE

Address

MIAMI, FL 33179

City/State and Zip Code

rrch@msn.com

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

For further information concerning this matter, please call:

RAPHAEL COHEN

305 546-3346
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

SECRETARY OF STATE
TALLAHASSEE, FL

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

VALUABLE COLLECTIBLES 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 FEBRUARY 13, 2022 and assigned
Florida document number 122000037192.

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:

2101 NE 197TH TERRACE

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33179

Enter new mailing address, if applicable:

2101 NE 197TH TERRACE

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33179

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:

ELISABETH AYOUB

New Registered Office Address:

2101 NE 197TH TERRACE

Enter Florida street address

MIAMI

City

Florida

33179

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>
PT	RAPHAEL COHEN	2101 NE 197TH	<input type="checkbox"/> Add
		MIAMI, FL 33179	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
P	RAPHAEL COHEN	2101 NE 197TH TERRACE	<input checked="" type="checkbox"/> Add
		MIAMI, FL33179	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
S	ELISABETH AYOUB	20225 NE 34 CT. #1515	<input type="checkbox"/> Add
		MIAMI, FL 33180	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
V	ELISABETH AYOUB	20225 NE #1515	<input type="checkbox"/> Add
		Miami, FL 33180	<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

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TALLAHASSEE, FL

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.

COHEN, PRESIDENT

RAPHAEL COHEN, PRESIDENT

Typed or printed name of signee

Filing Fee: \$25.00