

L220000061639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

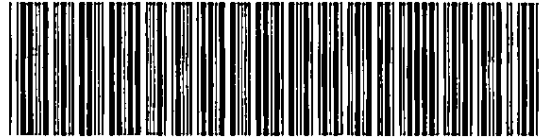
(Document Number)

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2022 AUG -1 PM 12:27

8/1/2022

COVER LETTER

TO: Registration Section
Division of Corporations

SF-1013-1015 LLC
SUBJECT: _____

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:

JED R. FRIEDMAN, ESQ.

Name of Person

JED R. FRIEDMAN, P.A.

Firm/Company

25 SE 2ND AVENUE, SUITE 716

Address

MIAMI, FL 33131

City/State and Zip Code

FRIEDMANLAWFIRM@GMAIL.COM

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

For further information concerning this matter, please call:

JED R. FRIEDMAN

305

375-0808

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)

↑
previously paid
see copy of check
attached

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

TALLAHASSEE, FL 32303

2022 AUG - 1 PM 12: 09

RECEIVED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 21, 2022

JED R FRIEDMAN, ESQUIRE
25 SE 2ND AVENUE
SUITE 716
MIAMI, FL 33131

SUBJECT: SF 1013-1015 LLC
Ref. Number: L22000061639

We have received your document for SF 1013-1015 LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

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) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 122A00016242

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

SF-1013-1015 LLC

2022 AUG -1 PM 12: 27

(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 15, 2022 and assigned
Florida document number L22000061639.

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:

18800 NE 29TH AVENUE, NO. 414

(Principal office address MUST BE A STREET ADDRESS)

AVENTURA, FL 33180

Enter new mailing address, if applicable:

18800 NE 29TH AVENUE, NO. 414

(Mailing address MAY BE A POST OFFICE BOX)

AVENTURA, FL 33180

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:

AVI AVSHALUMOV

New Registered Office Address:

18800 NE 29TH AVENUE, NO. 414

Enter Florida street address

AVENTURA

Florida 33180

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.


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>
MGR	MARCELA DAFNA	800 SE 4TH AVENUE, SUITE 110	<input type="checkbox"/> Add
		HALLANDALE BEACH, FL 33009	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DAVID DVIR KRISI	230 174TH STREET NO. 1404	<input checked="" type="checkbox"/> Add
		SUNNY ISLES BEACH, FL 33160	<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
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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)

Typed or printed name of signee