

122000236874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

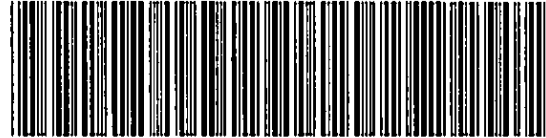
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S. CHATHAM  
DEC 19 2022

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SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS  
22 NOV 14 PM 6:18



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2022 OCT 14 11:09:22

October 1, 2022

FYRE TURKS, LLC.  
1413 20TH STREET, UNIT #117  
MIAMI BEACH, FL 33139 US

SUBJECT: FYRE TURKS, LLC.  
Ref. Number: L22000236874

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

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

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) 245-6052.

Summer Chatham  
Regulatory Specialist II

Letter Number: 922A00021940

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FYRE TURKS, 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:

Name of Person

FYRE TURKS, LLC.

Firm/Company

1413 20TH STREET UNIT #117

Address

MIAMI BEACH, FL 33139

City/State and Zip Code

ELI@JEGSONS.COM

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

For further information concerning this matter, please call:

ELIYAHU NASH

917 579-6654

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

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

FYRE TURKS, 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 MAY 20TH, 2022 and assigned Florida document number L22000236874.

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

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>
MR.	ELIYAHU NASH	1413 20TH STREET	<input type="checkbox"/> Add
		UNIT #117	<input checked="" type="checkbox"/> Remove
		MIAMI BEACH, FL 33139	<input type="checkbox"/> Change
MGR	FYRE HOLDINGS, LLC.	1413 20TH STREET	<input checked="" type="checkbox"/> Add
		UNIT #117	<input type="checkbox"/> Remove
		MIAMI BEACH, FL 33139	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

SECRET  
DIVISION 3  
FILED  
JAN 11 2011  
PH

DIVISION OF COLLECTOR  
22 NOV 14 PM 6:48

FILED  
JAN 10 1968  
FBI - NEW YORK

**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.

Dated MONDAY JUNE 27TH 2022

ELIYAHU NASH

Typed or printed name of signee

**Filing Fee: \$25.00**