Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : 120170000056 Phone : (954)842-2931

Fax Number : (954)842-2936

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RACHELI SELLS MIAMI LLC

Certificate of Status	0
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Page Count	05
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S. ROLLRIS

## COVER LETTER

	egistration Sec vision of Corp			
0.14.40.000		SELLS MIAMI LLC		
SUBJECT	:	Name of Limi	ited Liebility Company	
The enclose	ed Articles of 3	Amendment and fee(s) are sub-	mitted for filling	
Please retu	rn all correspor	ndence concerning this matter	to the following:	
	•	ROCHEL FRIEDMAN		
			Name of Person	
		ROCHEL FRIEDMAN, U	LC.	
			Firm/Company	
		9349 DICKENS AVE		
			Address	
		SURFSIDE, FL 33154		
			City/State and Zip Code	
		shmulyfriedman@gmail.com	m to be used for future annual report notific	estion)
For further	information or	oncerning this matter, please of		
ROCHEL	FRIEDMAN		917 679-5740 at ()	
	Name of	Person	Area Code Daytime	Taisphone Number
Enclosed is	s a check for th	e following amount:		
<b>≡ \$</b> 25.00	) Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55 00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R D P	Initing Addressing Segistration Solvision of Co. Box 632 allahassee. If	ection orporations 7	Street Address: Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	orations Illahassee Street, Suite 810

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RACHELI SELLS MIAMI LLC		
(Name of the Limited I	lability Company as it now appears on efforida Limited Liability Company)	pur records.)
The Articles of Organization for this Limited Liabi	lity Company were filed on $\frac{07/11/2}{}$	222 and assigned
Florida document number L22000308735	<u> </u>	
This amendment is submitted to amend the followi	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	
ROCHEL FRIEDMAN, LLC		
The new name must be distinguishable and contain the word	s "Limited Liability Company," the design	ation "LLC" or the abbreviation "ULC."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
		=
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
		:
B. If amending the registered agent and/or regis	stered office address on our recor	ds. enter the name of the new regis
agent and/or the new registered office address h	ere:	-2
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Fiorida si	rest address
		, Florida
-	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>	Address	Type of Action
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			Change
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<u>lote:</u> If the date inserted in this b	te date of filing:  ust be specific and cannot be prior to date of filing block does not meet the applicable statutory Department of State's records.	(optional) or more than 90 days after filing.) Pursuant to 605 02 filing requirements, this date will not be listed
record specifies a delayed effecti l is filed.	ve date, but not an effective time, at 12:01 a	.m. on the earlier of: (b) The 90th day after th
ated	Rochel Friedman	
	Rochel Friedman	
<del> </del>	Signature of a member or authorized representa	ative of a member

Filing Fee: \$25.00