

L23000031351

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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2023 MAR 21 AM 10:22

CLERK OF STATE  
TALLAHASSEE, FL

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

Incorporating Services, Ltd.

1540 Glenway Drive  
Tallahassee, FL 32301  
850.656.7956  
Fax: 850.656.7953  
www.incserv.com  
e-mail: accounting@incserv.com

incserv

**ORDER FORM**

**TO:** Florida Department of State  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, FL 32303  
corphelp@dos.myflorida.com  
850-245-6051

**FROM:** Melissa Moreau  
mmoreau@incserv.com  
850.656.7953

**REQUEST DATE** 3/21/2023

**PRIORITY** Regular Approval

**OUR REF.# (Order ID#)** 1131997

**ORDER ENTITY**  
MALFRAN U.S.A., LLC

**PLEASE PERFORM THE FOLLOWING SERVICES:**

**MALFRAN U.S.A., LLC (FL)**

File the attached amendment

**NOTES:**

\$25.00 Authorized

**RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MALFRAN U.S.A., 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:

LARRY BEHAR

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

888 SE THIRD AVE, SUITE 400

\_\_\_\_\_  
Address

FORT LAUDERDALE, FL 33316

\_\_\_\_\_  
City/State and Zip Code

larry@cb-5lawyers.com

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

For further information concerning this matter, please call:

LARRY BEHAR

954 524-8888  
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**

**FILED**  
2023 MAR 21 AM 10:22

MALFRAN U.S.A., LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

CLERK OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 01/19/2023 and assigned  
Florida document number 1.23000037351.

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)**

888 SE THIRD AVE

SUITE 400

FORT LAUDERDALE, FL 33316

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

888 SE THIRD AVE

SUITE 400

FORT LAUDERDALE, FL 33316

**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:

LARRY BEHAR

New Registered Office Address:

888 SE THIRD AVE, SUITE 400

Enter Florida street address

FORT LAUDERDALE

City

Florida 33316

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.*

/s/ Larry Behar

**If Changing Registered Agent, Signature of New Registered Agent**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

2023 MAR 21 AM 10:24  
TAYLOR OF STATE  
TALLAHASSEE, FL

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(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)

**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.

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.

Dated March 20th 2023

Henry C. Lee

LARRY BEHAR

Typed or printed name of signee

**Filing Fee: \$25.00**