

**Division of Corporations Electronic Filing Cover Sheet** 

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.

(((H18000135678 3)))



H160001358783ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : ROSENBERG & PINSKY

Account Number : I20020000005 : (954)772-5151 Phone Fax Number

: (954)772-4224

Solution ##Enter the email address for this business ##Intity to be used for futural ##Enter the email address for this business ##Intity to be used for ##Enter the email address for this business ##Intity to be used for ##Intity ##Inti annual report mailings. Enter only one chail address please \*\*

Email Address:

2018 HAY - 1

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COCONUT CREEK DEVELOPERS, L.C.

|                       | 200 |         |
|-----------------------|-----|---------|
| Certificate of Status | iji | 0       |
| Certified Copy        |     | 0       |
| Page Count            |     | 01      |
| Estimated Charge      |     | \$25.00 |

B FIGUEROA MAY 02 2018

Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| COCONUT CREEK DEVELOPERS LC   | office poly                                  |                         |                   |
|---|--|-------------------------|-------------------|
| (Name of the Limited Liability Compan<br>(A Florida Limited Li  | y as it now appears on a<br>ability Company) | our records.)           |                   |
| The Articles of Organization for this Limited Liability Company v   | were filed on June 14                        | , 1999                  | _ and assigned    |
| Florida document number 1.99000003436   |  |                         |                   |
| This amendment is submitted to amend the following:   |  |                         |                   |
| A. If amending name, <u>enter the new name of the limited liabil</u>  | ity company here:                            |                         |                   |
| The new name must be distinguishable and contain the words "Limited Liability".   | ry Company," the designs                     | stion "LLC" or the abbr | eviation "L.L.C." |
| Enter new principal offices address, if applicable:   |  | <u>≥</u> o              | 2                 |
| Principal office address MUST BE A STREET ADDRESS   |  |                         | <b>X</b>          |
|   | <u> </u>                                     |                         | ≺                 |
|   | W.   | ₩<br>Ma                 | - 1               |
| Enter new mailing address, if applicable:   |  | -T                      | <u> </u>          |
| Mailing address MAY BE A POST OFFICE BOX)   |  |                         |                   |
|   | Gertas 1                                     |                         | <u>ກ</u>          |
| B. If amending the registered agent and/or registered off<br>registered agent and/or the new registered office address here | fice address on our                          | <u> </u>                | л                 |
| Name of New Registered Agent:   |  | <del></del>             | <del> </del>      |
| New Registered Office Address:  | Enter Florida și                             | treet address           |                   |
|   | ENGEL TITLE IOU 91                           | r eet 11112/233         |                   |
|   | City   | , Florida               | Zip Code          |
|   | -ny  |                         | wh com            |

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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 Rightered 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     |
|--------------|--------------------------|---------------------------|--------------------|
| AMBR         | LOUIS TREMATERRA         | 6470 Brava Way            |                    |
|              |                          | Boca Raton, Chrida 33433  | ☐ Remove           |
|              |                          | er.                       | ☐ Change           |
| MGR          | I.M.S. ENTERPRISES, INC. | 6470 Brava Way            | D Add              |
|              |                          | Boca Raton, liorida 33433 | ■ Remove           |
|              |                          |                           | ☐ Change           |
|              |                          |                           | Add                |
|              |                          |                           | □ Remove           |
|              |                          | <del></del>               | A Change           |
|              |                          | Top                       | CRETARY OF Repidve |
|              |                          | 12-<br>12-                | Remove             |
|              |                          |                           | S I Change         |
|              |                          |                           |                    |
|              |                          |                           | Remove             |
|              |                          |                           | Change             |
|              |                          |                           | DAdd               |
|              |                          |                           | □ Remove           |
|              |                          | <b>₩</b> ?                | ☐ Change           |

| neuding any other information, enter cha   | nge(s) here: (Attorn additional sh                | eels, if necessary.)                               |
|--|---|--|
|  |   |  |
|  |   |  |
|  |   | · · · · · · · · · · · · · · · · · · ·              |
|  | · · ·   |  |
|  | Ťr.   |  |
|  | · · · · · · · · · · · · · · · · · · ·             |  |
|  |   |  |
|  |   |  |
|  |   |  |
|  |   | · · · · · · · · · · · · · · · · · · ·              |
|  |   |  |
|  |   |  |
|  |   | <u> </u>   |
|  |   | <u> </u>   |
|  | <u> </u>  | ECR  |
|  | 107   | 34(2)  |
|  |   | ASSET T  |
| •  |   | Te 👱 [   |
|  |   |  |
|  |   | 0.5A :: 0.5  |
|  |   | <u> </u>   |
| •  |   |  |
|  |   |  |
|  |   | / / l W  |
| ctive date, if other than the date of filing:<br>effective date is listed, the date must be specific and c | annot be prior to date of filing or more than     | (optional) 190 days after filing.) Pursuant to 605 |
| e: If the date inserted in this block does not me<br>iment's effective date on the Department of Sta       | et the applicable statutory filing requi          | rements, this date will not be list                |
| miont a checure one of the Department of the   | tic a terotus.                                    |  |
| record specifies a delayed effective da  | te but not an effective time                      | et 12:01 a.m. on the excli                         |
| ne 90th day after the record is filed.   | te, but not an enecuve unic,                      | at 12.01 a.m. on the carm                          |
|  | THE WATER COMMITTEE A CHARGE DAME TO THE PROPERTY | ,  |
| ed April 30th  | 2018  |  |
|  |   |  |
|  |   |  |
| Mario esta en  | 2   |  |
| Signature of a mo  | ember or authorized representative of a me        | ember  |

Page 3 of 3

Filing Fee: \$25.00