LONCONYOY9

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
~ (Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
. <u>-</u>		

Office Use Only



200293718772

01/25/17--01003--020 **25.88

TALLAHASSIE, FLORIDATALLAHASSIE, FLORIDATALLAHASSIE, FLORIDATAL

JAN 2 6 2017 S. YOUNG

COVER LETTER

	ion Section of Corporations
	NE 19th Place, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Artic	les of Amendment and fee(s) are submitted for filing.
Please return all co	rrespondence concerning this matter to the following:
	ALIZA DOMOROWSKi Name of Person
	765 N.E. 19th PLACE LLC
	Firm/Company 13542 Pine Villa Lane Address 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	Address P
	Fort Myers, FL 33912
	Fort Myers, FL 33912 City/State and Zip Code Jakehemed@msn.com The code of
	Jakehemed@msn.com E-mail address: (to be used for future annual report notification)
For further informa	tion concerning this matter, please call:
Jacob Hemed	239 770-8097 at ()
N	ame of Person Area Code Daytime Telephone Number
Enclosed is a check	for the following amount:
\$25.00 Filing F	ee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)
R D P	IAILING ADDRESS: cgistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

765 NE 19th Place, LLC	41.144.	
(Name of the Limited	Linbility Company as it now appears on our reco Florida Limited Liability Company)	<u>urr</u>)
The Articles of Organization for this Limited Liab Florida document number <u>L07000014049</u>	pility Company were filed on May 29, 2012	and assigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab		17 LANGE SECTION AND ACTUAL AND A
(Principal office address MUST BE A STREET	ADDRESS)	2 分記
		<u> </u>
Enter new mailing address, if applicable:		PH 3
(Mailing address MAY BE A POST OFFICE BO	OX)	5 0
B. If amending the registered agent and/or registered agent and/or the new registered office		ds, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	255
	. F	Porida Provincia de la composición dela composición de la composición
	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>	Type of Action
MGR	David Hemed		
			■ Remove
			Change

		•	☐ Remove
			Change
	•	a - 1811111_	17 Add A
			Add Add A A S S S S S S S S S S S S S S
			Refriove Charige
		***************************************	□ Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
			□ Change
			Add
			□ Remove
			☐ Change

	7
	3
	H 3:
	50
Effective date, if other than the date of filing:	otional) fler filing.) Pursuant to 605.0207 this date will not be listed as
he record specifies a delayed effective date, but not an effective time, at 12:01 The 90th day after the record is filed.	l a.m. on the earlier of
Dated 1-20 2017. alisa Dombraseshi	
Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00