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## **COVER LETTER**

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TO: Registration Section Division of Corporations
SUBJECT: E/16 Property Management Mantenance Solutions of F/, L 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:
Dennis Osu Name of Person
Elite Property management & Maintenace Solutions of FI, ULL
1633 Eact Vine ST Suite #214
City/State and Zip Code
CFL Homemanagement @ amail: com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:    Solution
Name of Person  Area Code & Daytime Telephone Number  Enclosed is a check for the following amount:
A Commence of the Commence of
□ \$25.00 Filing Fee  □\$30.00 Filing Fee &  □\$55.00 Filing Fee &  □\$60.00 Filing Fee,

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, 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

same Solutions of FILLO The Articles of Organization for this Limited Liability Company were filed on \_ 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 end with the words "Limited Liability Company," the designation "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

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 auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = M	MGRM = Managing Member			
<u>Title</u>	Name	Address	Type of Action	
MGRM	Dennis Colon	1633 Eact Vine ST. Sw. Kissimmee F-1, 3474	<u>√e</u> X Add <del>+206</del> Add	
		Kissimmee 1-1, 3474	Remove	
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			Remove	

If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	
ed	8/21/2013
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13 AUG 29 AM II: 31
SECRETARY OF STATE
JALLAHASSEE FINATE