

LI 4000145645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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L14-145645

04/08/16--01008--004 **25.00

Amend

FILED
16 APR -8 PM 3:02
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

APR 13 2016
N. CAUSSEAU

COVER LETTER

**TO: Registration Section
Division of Corporations**

10431 Property, LLC.

SUBJECT: _____
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:

Marisol Palacios

Name of Person

Firm/Company

400 N.W. 74 AVE

Address

MIAMI, FL 33126

City/State and Zip Code

Marisolpalacios2009@hotmail.com

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

For further information concerning this matter, please call:

Marisol Palacios

786

406-5799

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**TO
ARTICLES OF ORGANIZATION
OF**

10431 Property, LLC.

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

The Articles of Organization for this Limited Liability Company were filed on 09/17/2014
Florida document number L14000145645

FILED
16 APR 17 PM 3:02
TALLAHASSEE, FLORIDA

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 "LLC."

Enter new principal offices address, if applicable:

400 N.W. 74 AVE, MIAMI, FL 33126

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

400 N.W. 74 AVE, MIAMI, FL 33126

(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:

Marisol Palacios

New Registered Office Address:

400 N.W. 74 AVE

Enter Florida street address

MIAMI

Florida

33126

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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Marisol Palacios	400 N.W. 74 AVE, MIAMI, FL 33126	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Habib Geagea	400 N.W. 74 AVE, MIAMI, FL 33126	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

16 APR 18
STATE OF FLORIDA
FALL ANNUAL MEETING
PH: 302

Marisol Palacios holds 100% of the shares of 10431 Property, LLC.

Multiple horizontal lines for additional information or notes.

FILED
16 APR - 8 PM 3:02
DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

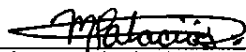
E. Effective date, if other than the date of filing: _____ (optional)

(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 APRIL 4TH, 2016



Signature of a member or authorized representative of a member

MARISOL PALACIOS

Typed or printed name of signee