117000238372

	Requestor's Name)	
·	Address)	
	Address)	
PICK-UP	City/State/Zip/Phone #)	Mail
(E	Business Entity Name)	
	Occument Number) Certificates of S	Statu s
Special Instructions t	o Filing Officer:	

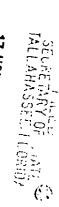
Office Use Only



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COVER LETTER

1,

TO: Registration S Division of Co			
AFFILIA	TED SHAG DEVELOPM EN T,	LLC	
SUBJECT:	Name of Lir	mited Liability Company	
		. , .	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	condence concerning this matte	r to the following:	
	Michelle Rice		
		Name of Person	
	Aftiliated Development		
	414 N. Andrews Ave	Firm/Company	
	<u> </u>	Address	
	Fort Lauderdale F1. 3330	1	
		City/State and Zip Code	
	mrice@affiliateddevelopm	(to be used for future annual report not	44
For further information	concerning this matter, please of		incation)
Michelle Rice		608 333-6740 at ()	
Name	of Person	Area Code Daytin	ne 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:		STREET/COUR	IFR ADDRESS:
Registration Section		STREET/COURIER ADDRESS: Registration Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
	uassee, FL 32314	2661 Executive Co Tallahassee, FL 3	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AFFILIATED SHAG DEVELOPMENT, LLC	
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co	ompany were filed on 11-17-2017 and assigned
Florida document number 1.17000238372	·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
N/A	
The new name must be distinguishable and contain the words "Limit	ited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDR	ESS) = 3 PS
Enter now modified address if applicable.	29 29 X
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OF FICE BOX)	
	
B. It amending the registered agent and/or regist registered agent and/or the new registered office addr	tered office address on our records, enter the name of the new
	
Name of New Registered Agent:	
N/A	
New Registered Office Address:	
ii.	Enter Florida street address
<u> </u>	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered	Agent:
hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and conaccept the obligations of my position as registered ago being filed to merely reflect a change in the registered company has been notified in writing of this change.	and agree to act in this capacity. I further agree to comply with the omplete performance of my duties, and I am familiar with and tent as provided for in Chapter 605, F.S. Or, if this document is d office address, I hereby confirm that the limited liability
ill i	

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	PARKSIDE TERRACE AFFILIATED	414 N. Andrews Avenue	
		Fort Lauderdale FL33301	■ Remove
			Change
MGR	SHAG DEVELOPMENT, LLG	1079 Mulberry Way	
		Boca Raton FL 33486	■ Remove
			□ Change
MGR	Burns, Jeffrey R.	414 N. Andrews Avenue	Add
		Fort Lauderdale FL 33301	□ Remove
			Change
MGR	Rojo, Nicholas	414 N. Andrews Avenue	
		Fort Lauderdale FL 33301	Remove
			□ Change
MGR	Smith, Darren J.	1079 Mulberry Way	Add
		Boca Raton FL33486	□ Remove
			Change
MGR	Henzy, Tim F.	69 Coles Avenue	Add
		Amityville NY 11701	□ Remove
			□ Change

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D. If amending any other information, enter,	change(s) here: (Attach additional sheets, if necessary.)	
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		_
E. Effective date, if other than the date of fill	ng:(optional)	
(If an effective date is listed, the date must be specific a Note: If the date inserted in this block does not	d cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 meet the applicable statutory filing requirements, this date will not be 15	05.0207 (3)(b) sted as the
document's effective date on the Department of	State's records.	
If the record energine a detayed effective	data but not an effective time at 12,01 a.m. on the end	liaz afı
(b) The 90th day after the record is filed	date, but not an effective time, at 12:01 a.m. on the ear	ner or:
November 20	2017	
Dated	i ,,	
Signature of	amember or authorized representative of a member	
Nicholas Rojo 🌘 📄 ,		
	Typed or printed name of signee	
	Page 3 of 3	
	Filing Fee: \$25.00	