

L03000002690

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16 MAY -9 PM 12:15
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TALLAHASSEE, FLORIDA

MAY 12 2016

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Brooks Family Properties V, L.L.C.

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:

Alvin Lam

Name of Person

Anderson Business Advisors

Firm/Company

3225 McLeod Drive, Suite 100

Address

Las Vegas, Nevada 89121

City/State and Zip Code

alam@andersonadvisors.com

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

For further information concerning this matter, please call:

Alvin Lam

800 706-4741
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 20, 2016

ALVIN LAM
3225 MCLEOD DRIVE SUITE 100
LAS VEGAS, NV 89121 US

SUBJECT: BROOKS FAMILY PROPERTIES V, L.L.C.
Ref. Number: L03000002690

RECEIVED
2016 MAY -9 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for BROOKS FAMILY PROPERTIES V, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 216A00008194

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Brooks Family Properties V, L.L.C.

(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 01/23/2003 and assigned
Florida document number L03000002690.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Anchored Investments V, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

265 South Federal Highway, Suite 294

Deerfield Beach, Florida 33441

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:

Anderson Registered Agents, Inc.

New Registered Office Address:

1000 North Washington Boulevard

Enter Florida street address

Sarasota

City

, Florida 34236

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>	<u>Type of Action</u>
MGR	Dennis H. Brooks	PO Box 1677	<input type="checkbox"/> Add
		Deerfield Beach, Florida 33443	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tho Thi Brooks	PO Box 1677	<input type="checkbox"/> Add
		Deerfield Beach, Florida 33443	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Kevin Hung Brooks	PO Box 1677	<input type="checkbox"/> Add
		Deerfield Beach, Florida 33443	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Toby T. Brooks	PO Box 1677	<input type="checkbox"/> Add
		Deerfield Beach, Florida 33443	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Dawn Thi Brooks	PO Box 1677	<input type="checkbox"/> Add
		Deerfield Beach, Florida 33443	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Dawn Thi Brooks	265 S. Federal Highway Suite 294	<input checked="" type="checkbox"/> Add
		Deerfield Beach, Florida 33441	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

FILED
16 MAY -9 PM 12:16
CLERK OF DISTRICT COURT
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 12, 2016


Signature of _____

Signature of a member or authorized representative of a member

Alvin Lam

Typed or printed name of signee