NO4 0000 19548

(Requestor's Name)				
(Address)				
(Ad	dress)			
(0)	10 A 87 10 A	40		
(Cit	ty/State/Zip/Phone	· #)		
PICK-UP	WAIT	MAIL		
(Bu	usiness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
J. HORNE				
	APR 18 2022	2		

Office Use Only



800384402958

04/04/22--01015--001 **25.00

FILED

2022 APR -4 AM 9: 27

SECRETARY OF STATE
TALLAHASSEE, FLOOR

COVER LETTER

TO:

Registration Section

Division of Cor	porations				
Papp Prope	rties. LC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
	ndence concerning this matter	_			
·	J	Ü			
	Joseph E. DeLeo, Esq.				
	Name of Person				
	Watson, Soileau, DeLeo & Burgett, P.A.				
	Firm/Company				
	3490 N. U.S. Highway 1				
		Address			
	Cocoa, FL 32926				
	J.,	City/State and Zip Code			
	davesdeedsllc@aol.com E-mail address: (to be used for future annual report noti	fication)		
For further information c	oncerning this matter, please c	all:			
Joseph E. DeLeo		321 631-1550			
Name of Person		at () Area Code Daytim	e Telephone Number		
Enclosed is a check for th	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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		Street Address: Registration Se Division of Cor The Centre of T	rporations		
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Or	_ ~ <u>~</u>
		SE
		F. 2 T
Papp Properties, LC		一
(Name of the Limited	Liability Company as it now appears on our records.) Florida Limited Liability Company)	表型 L T
(^	Profita Emitted Elability Company)	SSR F
	6 March 4, 2004	7 2 E
The Articles of Organization for this Limited Liab		and assigned
Florida document number L04000019548		9.
		三二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二
This amendment is submitted to amend the follow	ring:	· ·
A. If amending name, enter the new name of the	he limited liability company here:	
, , ,		
		··
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new maiting address, if applicable:		
	<u></u>	
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
	istered office address on our records, enter the	name of the new registered
agent and/or the new registered office address	<u>here</u> :	
NI CNI DI LA LA LA		
Name of New Registered Agent:		
None Designation of Office Address.		
New Registered Office Address:	Enter Florida street address	
	Liner I wind sireet dairess	
	, Florid	a
	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>	Address	Type of Action
MGRM Marilyn J. Papp	Marilyn J. Papp	537 Spring Lake Drive	
		Melbourne, FL 32940	■ Remove
			□Change
AMBR David J. Papp	David J. Papp	537 Spring Lake Drive	\exists Add
		Melbourne, FL 32940	□Remove
			\toChange
			□Add
			Remove
			□Change
			□ Remove
			□Change
			□Add
		□Remove	
			☐ Change
		□Add	
		□Remove	
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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 1 Signature of a member or authorized representative of a member Joseph E. DeLeo Typed or printed name of signee