

**L05000064330**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**600293291866**

~~614000135312~~  
~~12/16/16 01016 024 \*\*25.00~~

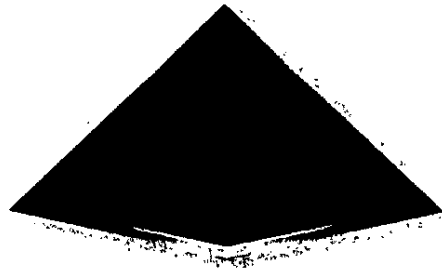
12/16/16--01016--024 \*\*25.00

FILED  
16 DEC 16 AM 10:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**T WASHINGTON**  
**DEC 19 2016**

**URGENT**

TIME SENSITIVE DOCUMENT  
PLEASE DO NOT SEPARATE CHECK  
FROM DOCUMENT



# STRATEGIC PROPERTIES GROUP, LLC

DEVELOPMENT ♦ INVESTMENT ♦ MANAGEMENT

December 8, 2016

Registration Section  
Division of Corporations  
P O Box 6327  
Tallahassee FL 32314

RE: Articles of Amendment to Articles of Organization  
Strategic Properties Group, LLC

Dear Registration Section

Enclosed please find a completed and signed Articles of Amendment to Articles of Organization of Strategic Properties Group, LLC.

I have also enclosed a check for the \$25.00 filing fee.

Please call me at the number below should you require further information to complete the changes.

Thank you,

  
Rozanna Maltbie

Operations Manager

FILED  
16 DEC 16 AM 10:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

STRATEGIC PROPERTIES GROUP, 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 06/28/2005 and assigned  
Florida document number L05000064330.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

17953 HUNTING BOW CIRCLE

UNIT 102

LUTZ, FL 33558

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

17953 HUNTING BOW CIRCLE

UNIT 102

LUTZ, FL 33558

**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:

17953 HUNTING BOW CIRCLE, UNIT 102

*Enter Florida street address*

LUTZ, FL

, Florida 33558

*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>	<u>Address</u>	<u>Type of Action</u>
Member	RILEY, STEVEN	103 UNIVERSITY CIRCLE	<input type="checkbox"/> Add
		ORMOND BEACH FL 32716	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
 06 DEC 16 AM 10:09  
 STATE  
 ALABAMA  
 LORIDA

15 DEC 16 AM 10:08  
RECEIVED OF STATE  
TALLAHASSEE, FLORIDA


FILED  
16 DEC 16 AM 10:08  
FBI - TAMPA  
RECEIVED  
TAMPA  
12/16/2016

**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 November 21, 2016.

  
Signature of a member or authorized representative of a member

Steven Riley  
Typed or printed name of signee