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U5/U8/23--U1U26--U21 **25.00

COVER LETTER

TO:

	istration Sec ision of Corp			
eun ir er	DEE PROPI	ERTIES, LLC		
SUBJECT:	-	Name of Lim	ited Liability Company	
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	idence concerning this matter	to the following:	
		JEFFREY SELZER		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		SELZER LAW		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		2550 NE 15th AVENUE		
			Address	
		FORT LAUDERDALE, F	L 33305	
			City/State and Zip Code	
		JEFF@SELZERLAW.CON		
		E-mail address: (to be used for future annual report no	ification)
For further in	iformation co	ncerning this matter, please co	all:	,
ANDY MAI	RTIN'		910 684-0716 at ()	
	Name of	Person	Area Code Daytir	ne Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 F	iling Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ling Address gistration S		<u>Street Address:</u> Registration Se	ection
Div	ision of Co	orporations	Division of Co	rporations
). Box 6327		The Centre of	
lal	lahassee. F	L 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DEE PROPERTIES, LLC		
(Name of the Limited Liability Company a (A Florida Limited Liab	is it now appears on our records.) Ility Company)	
he Articles of Organization for this Limited Liability Company we	re filed on 05/12/2016	and assigned
orida document number L06000053016		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability	company here:	
he new name must be distinguishable and contain the words "Limited Liability C	Company," the designation "LLC" or th	e abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
_		22
nter new mailing address, if applicable:		
Aailing address MAY BE A POST OFFICE BOX)		. င်ာ
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. If amending the registered agent and/or registered office add gent and/or the new registered office address here:	ress on our records, <u>enter the n</u>	ame of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	
	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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Anthony DeRiggi, TEE	T'EE of A. DeRiggi Trust UAD10/28/2022	□Add
		6192 NW 24th Street	≡ Remove
		Boca Raton, FL 33434	□Change
			□Add
			□Remove
			□ Change
			DAdd
			CD Remove
			Change
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Tective date, if other than the date of filing:			(opt	ional)	
an effective date is listed, the date must be specific and cannot be ote: If the date inserted in this block does not meet the ap			than 90 days afte	r filing.) P	
ocument's effective date on the Department of State's reco	ords.	aratory minig re	quirements, tir	is duic w	ii not be listed
record specifies a delayed effective date, but not an effecti is filed.	ive time, at	12:01 a.m. on t	he earlier of: (o) The 9	Oth day after th
is filed.					
ated May 4	11.				
Signature of smember or					

. .

Filing Fee: \$25.00