L08000001377

(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:

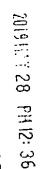
Office Use Only

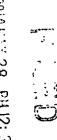


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COVER LETTER

TO:	Registration Se Division of Cor					
SUBJE	AIG Prope					
OUINI.		Name of Limited Liability Company				
		Amendment and fee(s) are sub	-			
r-rease i	return all correspo	ndence concerning this matter Armando I Gonzalez	to the tonowing.			
			Name of Person			
		7557 W SAND LAKE RD #	Firm/Company 181			
		ORLANDO, FL 32819	Address			
		City/State and Zip Code ARMANDO@MYAIGHOME.COM				
		E-mail address: (to be used for future annual report notifi	cation)		
For furt	her information co	oncerning this matter, please co	all;			
Arman	do Gonzalez		407 346-6229			
	Name of	f Person	at () Area Code Daytime	Telephone Number		
Enclose	ed is a check for th	ne following amount:				
■ \$25	5,00 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 tadditional 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



AIG Properties LLC

2019 HT.Y 28 PH 12: 36

(Name of the Limited Lint	pility Company as it now appears on our records rida Limited Liability Company)	
(A Ho	L	
The Articles of Organization for this Limited Liability	Company were filed on 12/27/2007	and assigned
Florida document number L08000001377	:	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
AG Properties LLC		
The new name must be distinguishable and contain the words "I	imited 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 ADd	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or rep		enter the name of the nev
registered agent and/or the new registered office ac	ddress here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Flo	rida
	City	Zip Code
New Registered Agent's Signature, if changing Registe	red Agent:	
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this chang	l complete performance of my duties, and agent as provided for in Chapter 605, F ered office address, I hereby confirm tha	d I am familiar with and S.S. Or, if this document is
	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
			Add
			□ Велюче
			☐ Change
			Add
			□ Remove
			Change
			Remove
			Change
			□ Remove
			Change
			D Add
			☐ Remove
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			□ Change

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Note:	ve date, if other than the date of filing: Way 23, 1009 (optional) retive date is listed, the date must be specific and cannot be pilor to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	MAY 23
	Signature of a member or authorized representative of a member
	Armando I Gonzalez

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00