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21 MAY 28 PH 1: 07

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

SUBJECT:	PERTY HOLDINGS, LLC				
	PERTY HOLDINGS, LLC Name of Lin	ited Liability Company			
The enclosed Articles of a	Amendment and fee(s) are sub	omitted for filing			
		-			
Please return all correspoi	ndence concerning this matter	to the following:			
	LARRY J ROSENQUIST				
		Name of Person	·· ······		
	L & P PROPERTY HOLE	DINGS, LLC			
	Firm/Company				
	3951 ENGLISH COLONY	ORIVE SOUTH			
		Address			
	JACKSONVILLE, FL 322	257			
		City/State and Zip Code			
	ljravb(@comcast.net				
	E-mail address: (to be used for future annual report no	tification)		
For further information co	incerning this matter, please c	all:			
LARRY J ROSENQUIST		904 2194767			
Name of	Person	at (at Code Daytin	me Telephone Number		
Enclosed is a check for the	e following amount:				
☐ \$25.00 Filing Fee	■ \$30.00 Filing Fee &	□ \$55 00 Filing Fee &	S60.00 Filing Fee.		
_ 021.000	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address:		Street Address:			
Registration S		Registration Se			
Division of Co P.O. Box 6327		Division of Co The Centre of			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

21 MAY 29 PH 1: 07

L & P PROPERTY HOLDINGS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

V. V. D. Mail Chilled			
The Articles of Organization for this Limited Liability Company	were filed on $\frac{03/1}{2}$	6/2009 	and assigned
Florida document number L09000025503			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	lity company her	<u>e</u> :	
The new name must be distinguishable and contain the words. Limited Liabil	ity Company," the des	ignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our rec	ords, <u>enter the nam</u>	e of the new registered
New Registered Office Address:	Enter Florid	a street address	
		Elavida	
	Cüy	Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of m rovided for in Ch	y duties, and I am fo apter 605, F.S. Or,	amiliar with and 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:

<u>m removed i</u>	tom our records.			
MGR = Manager AMBR = Authorized Member		Address 21 MAY 28 FA 1: 07 Type of A		
<u>Title</u>	<u>Name</u>	Address 21 HAY 28	Type of Action	
MGR	JANET LOPEZ	3951 ENGLISH COLONY DRIVE SOUTH	= Add	
		JACKSONVILLE, FL 32257	□Remove	
			□ Change	
			□Add	
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ffective date, if other than th	he date of filing:
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record specifies a delayed effect is filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the
ated MAY 25	2021
atti	
	

Filing Fee: \$25.00

Typed or printed name of signee