

L09000062226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

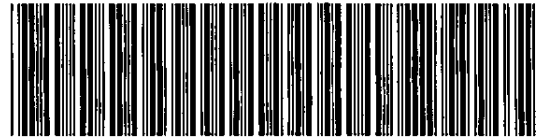
(Business Entity Name)

(Document Number)

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09/12/16--01026--029 **25.00

FILED

2016 SEP 12 PM 12:17

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**K. SALY
EXAMINER
SEP 15**

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MHAB Florida Properties, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter Leerdam

Name of Person

Leerdam Properties, Inc.

Firm/Company

303 E Par St

Address

Orlando, FL 32804

City/State and Zip Code

PLeerdam@LeerdamProperties.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter Leerdam

407 740-0993
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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
(additional 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**

M.H.A.B Florida Properties, LLC

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

FILED
2016 SEP 12 PM 12:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 06/25/2009 and assigned
Florida document number L09000062226.

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:

303 E Par Street

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32804

Enter new mailing address, if applicable:

303 E Par Street

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, FL 32804

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:

Peter Leerdam

New Registered Office Address:

303 E Par St

Enter Florida street address

Orlando

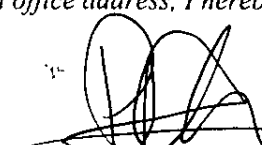
City

, Florida 32804

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>
MGR	Theodora Uniken Venema	618 E Sourth Street, Suite 500	<input type="checkbox"/> Add
		Orlando, FL 32801	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Peter A Leerdam	303 E Par Street	<input checked="" type="checkbox"/> Add
		Orlando, FL 32804	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

FILED
2016 SEP 12 PM 12:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 SEP 14
STATE
DEPARTMENT OF FLORIDA
TALLAHASSEE, FLORIDA

FILED
2019 SEP 12 PM 12:18
U.S. DISTRICT COURT
SOUTHERD DISTRICT OF FLORIDA
MIAMI, FLORIDA

(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)

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.

09-09-2016

Signature of a member or authorized representative of a member

Michael H.A. Brinkman

MICHAEL HA BRINKMAN
Typed or printed name of signer