L1000000 8247

(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:





000341973680

08/15/20--01015--005 ++25.00

232011116 11 9:55

R. WHATE. MAR 27 2020

COVER LETTER

Change address to title co 1/14/10/20

SUBJECT: Themis Properties LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Richard Waltzer
Name of Person
Themis Properties LLC
Firm/Company
socresion 2880 Nu Zirth pi
Address
fort landerdale, SI 3330Le Floridarich @ gmail.com
City/State and Zip Code
+ loridarich @ gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Part Name of Person at (AF4), 242 - 6427

Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

TO:

Registration Section Division of Corporations

☐ \$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

16 / 9:55 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 Florida document number L 1000008247 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Enter Florida street address _. Florida City

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>	Address	Type of Action	
7 MBR	Brooke V	Natter	ddd	
			□ Remove	
				
			Remove	
			☐ Change	
			Add	
			□ Remove	
			Change	
			□ Remove	
			☐ Change	
				
			Remove	
		 	□ Change	
	.		□ Add	
			□ Remove	
			Change.	

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	. \\\\
	M
Note:	ive date, if other than the date of filing:
(b) The	cord 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	January 12th 2010.
	Signature of a member or authorized representative of a member Richard Waltzer

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00