# 1000047201

(Requ	estor's Name)	)		
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PICK-UP	☐ WAIT	MAIL		
(Busin	ess Entity Na	me)		
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Fili	ng Officer:			

Office Use Only

G. MCLEOD

SEP 22 2011

**EXAMINER** 



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SECRETARY OF STATE
ALL AHASSES F. SAIE

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: DORAL PROPERTY RENTALS LLC  Name of Limited Hiability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Christopher T Curcio Name of Person	
Firm/Company	
7012 NW 114th Ct	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Christopher Curcio at (786) 553 9444  Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \times \t	

### MAILING ADDRESS:

, isi

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

	City		Zip (	Code
		, Florida		
New Registered Office Address:		Enter Florida street d	address	
Name of New Registered Agent:				
registered agent and/or the new registered office add	<u>iress nere</u> :			
B. If amending the registered agent and/or registered agent and/or the new registered office add		n our records, <u>ente</u>	r the nan	ne of the nev
Muning nuress WAT BE A FOST OFFICE BOAT				
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	<del></del> -		SE SE	<u> </u>
			For P	
			SXY	-
(Principal office address MUST BE A STREET ADD	RESS)		AN CO	T Ž.
Enter new principal offices address, if applicable:			ALEC SEC	
"L.L.C."	ords Elimited Elability Co	impany, the designation		me aboreviane
The new name must be distinguishable and end with the wo	FSTATE LL	mnany" the designation	n "I I C" or	the abbreviation
A. If amending name, enter the new name of the lin	nited liability company	<u>here</u> :		
This amendment is submitted to amend the following:				
	<u></u> .		,	
Florida document number			<del></del>	Ü
The Articles of Organization for this Limited Liability	Company were filed on	5/01/2010	) and	I assigned
(A Florida	ty Company as it now app Limited Liability Compar	ny)		
Name of the Limited Liability	TY RENIAL	nears on our records		_

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

R = Ma RM = N	nager Aanaging Member		
<u>e</u>	<u>Name</u>	Address	Type of Acti
	· · · · · ·		Add
			Add Remove
<del></del>			Add Remove
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			Add Remove
			— AddRemove
ameno	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	——————————————————————————————————————
_			<del></del>
			_ 
 d	Sentember 9th, 20	<u> </u>	
	Signature of a member	r pr authorized representative of a member	<del></del>
	Christa	other T Curcio dr printed name of signee	

Page 2 of 2

Filing Fee: \$25.00