Division of Corporations



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Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SANCHEZ-MEDINA & ASSOCIATES, P.A.

Account Number : I20030000135 Phone : (305)448-4344

Fax Number

: (305)448-7887

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Hmall.	Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AJM PROPERTIES HOLDING, LLC

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Corporate Filing Menu

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## **COVER LETTER**

TO:		ation Sec 1 of Corp					
SUBJE	CT:		AJM PROPER	TIES HO	LDING, LLC		
00202	···	******		ited Liability C			
The enc	losed Art	ticles of A	mendment and fee(s) are sul	omitted for filir	ıg.		
Please r	eturn all o	correspon	dence concerning this matter	to the following	ng:		
	Rol			and Sanche	ez-Medina Jr.	,	
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				Firm/Co	mpany		
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				Addro	09.5		
			Cor		lorida 33134		
			_	City/State and			
			E-mail address: (	to be used for fu	rure annual report no	lification)	
For furt	her infor	nation co	ncerning this matter, please o	call;			
	Rol	land Sa	nchez-Medina Jr.	at ( 3	:05 \	448-43	344
Name of Person				a (	Area Code & Dayti		
Enclose	ed is a cho	ck for the	following amount:				
<b>₹2</b> 5.	00 Filing	Fec	S30.00 Filing Fee & Certificate of Status	Certifie	illing Foo & ed Copy onal copy is enclos	_	660.00 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/COU) Registration Sect Division of Corp Clifton Building 2661 Executive ( Tallahessee, FL:	ion orations Center Circ			

FILED

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

10 JUN 18 AM 8: 25 SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AJM PROPERTIES	S HOLDING,	LLC		
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appea nability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Company	were filed on	05/04/2010	and assigned	
Florida document number <u>L.10000047745</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company he	<u>rė</u> :		
The new name must be distinguishable and end with the words "Limit"L.L.C."	ted Liability Comp	any," the designation "L	LC" or the abbreviation	
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)	<del></del>			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>enter t</u> l	he name of the new	
Name of New Registered Agent:				
New Registered Office Address:	Ei	nter Florida street addr	ress	
	, Florida			
	City		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 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

MGR = Manager

MGRM = Managing Member

3054240237

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:

Litle	Name	Address	Type of Action
MGR	ANDRES MEJIDES	7350 S.W. 69TH COURT MIAMI FL 33143	Add Remove
	***		Add Remove
**************************************			Add Remove
	-		Add Remove
			Add Remove
		*	Add Remove
D. If amendin	g any other information, enter change(	1	LOSSE T
			FILED 118 AM 8: 25 TARY OF STATE ASSEE, FLORIDA
Dated	June 18. 2010	o.	
	Poland	abhorized representative of a member  Sanches - Medias IR.  printed name of signce	

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Filing Fee: \$25.00