110000070071

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COVER LETTER

Division of Con				
	AMILY FLORIDA PROPERTY	, L.L.C.		
SUBJECT:	Name of Limi	ted Liability Company		
The enclosed Articles of	`Amendment and fee(s) are subn	nitted for filing.		
Please return all correspo	ondence concerning this matter t	o the following:		
	THOMAS W. BUTTI			
		Name of Person		
		Firm/Company		
17739 MORNINGHIGH DR				L SEP
		Address		29
	LUTZ, FL 33549			
	TBUTTII@TAMPABAY.R	City/State and Zip Code		EFL0823
	-	be used for future annual report notifi	cation)	i g
For further information of	concerning this matter, please ca	II:		
THOMAS W. BUTTI		813 909-0721 at ()		
Name o	of Person		Telephone Number	
Enclosed is a check for t	he 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 Statu Certified Copy (additional copy is encl	
	JING ADDRESS:	STREET/COURIE		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BACSO FAMILY FLORIDA PROPERTY				
(<u>Name of the Limited Liah</u> (A Flor	p <mark>ility Compa</mark> r ida Limited L	ny as it now appears on our recordability Company)	<u>ds.</u>)	
The Articles of Organization for this Limited Liability	Company	were filed on JUNE 30, 2010	and assigne	ed
Florida document number L10000070071				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the li	mited liabi	lity company here:		
N/A				
The new name must be distinguishable and contain the words "L	imited Liabili	ity Company," the designation "LLC		<u> </u>
Enter new principal offices address, if applicable:		17739 MORNINGHIGH DR	ට්) ගැ	<u> </u>
(Principal office address MUST BE A STREET ADI	DRESS)	LUTZ, FL. 33549	4	<u> </u>
			Ğ	
			. 5	
Enter new mailing address, if applicable:		17739 MORNINGHIGH DR	4.5	
(Mailing address MAY BE A POST OFFICE BOX)		LUTZ, FL. 33549	7	
B. If amending the registered agent and/or regregistered agent and/or the new registered office ac			ls, enter the name of t	he new
Name of New Registered Agent: N/A	<u> </u>			
New Registered Office Address: N/A	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
		Enter Florida street addre	!SS	
N/A	\ 		lorida N/A	
		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 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>	Type of Action
MGR	THOMAS W. BUTTI	17739 MORNINGHIGH DR	⊒ Add
		LUTZ, FL. 33549	Remove
			Change
MGR	DOROTHY J. MATTINGLY	708 BELLAH DR	□ Add
		IRVING, TX 75062	Remove
			☐ Change
AMBR	DOROTHY J. MATTINGLY	708 BELLAH DR	G CONTRACT
		IRVING, TX 75062	29 29
			Change, □
AMBR	ALFRED BACSO	110 OVERLOOK AVE	
		WADSWORTH, OH 44281	■ Remove
		4 400 - 1 11 - 11 - 11 - 11 - 11 - 11 - 11	Change
AMBR	DONALD W. BACSO	1420 SEA PINES ST	🗖 Add
		MESQUITE, NEVADA 89027	■ Remove
			☐ Change
	-DONALD W. BACSO JUB		Add
		 	☐ Remove
			☐ Change

N/A				
				
				<u>.</u>
				
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				63.
				- PH 12:
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effective date, if other than the date of filing effective date is listed, the date must be specific and the late inserted in this block does not iment's effective date on the Department of	nd cannot be prior to da meet the applicable	ate of filing or more than		
record specifies a delayed effective ne 90th day after the record is filed	date, but not ar i.	n effective time, a	at 12:01 a.m. on the	earlier
ed	2016			
Jan 4 h) that				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Signature of	a member or authorize	d representative of a me	mber	

Page 3 of 3

Filing Fee: \$25.00