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Division of Corporations

Fax Number : (850)617-6383

Prom:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number : 120070000020

Phone : (813)435-3176

Fax Number

: (813)335-6358

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

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MACHIN PROPERTIES, LLC

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H19000165 2893

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MACHIN PROPERTIES, LLC			
(Name of the Limited Liability Compa (A Fiorida Limited	iny as it now appears on our Liability Company)	records.)	
The Articles of Organization for this Limited Liability Company	were filed on 03/04/2011	·	_ and assigned
Florida document number L11000027498			
The Articles of Organization for this Limited Liability Company were filed on 03/04/2011 and assigned Florida document number L11000027498 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 "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailling 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 agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florido street address			
A. If amending name, enter the new name of the limited ligh	sility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	n "LUC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		·	2
(Principal office address MUST BE A STREET ADDRESS)		: [: 	; <u>G</u>
	<u>-</u>	- ² 를 된	
Enter new mailing address, if applicable:		 ;	, 등 명료및 .
(Mailing address MAY BE A POST OFFICE BOX)			
	ddress MAY BE A POST OFFICE BOX)		
		cords, enter th	e name of the new
registered agent andors the new registered office andress new	.		
Name of New Registered Agent:			
New Registered Office Address:		·	
	Enter Florida street	address	
		, Florida	
	Сіт		Zıp 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

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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
MGR	Isabel Machin	200 N. PALM AV #33535 33535	[] Add
			■ Remove
		INDIALANTIC, FL 32903	Change
			Add
			□ Ghange
	•		Remove
			Change
			□ Add
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			Remove
			Cl Change

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The 90th cay after the	yed effective date, but no record is filed. 2019	t an effective time, at 12	:01 a.m. on the earlie	r of:
Sate: If the date inserted in this locument's effective date on the	must be specific and cannot be prior s block does not meet the applic e Deputtment of State's records.	to date of filing or more than 90 day able statutory filing requirement	, and also were also de not	
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