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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062

Fax Number

Phone : (323)962-8600 : (323)962-3889

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN? **T47 PROPERTIES LLC** 

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**OCT** 3 0 2015

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757 855 0033

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11:33:34 a.m. 10-28-2015

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## **COVER LETTER**

	corporations perties LLC	
SUBJECT:		
	Name of Limited Liability Company	
The enclosed Articles	of Amendment and fee(s) are submitted for filing.	
Please return all corres	pondence concerning this matter to the following:	
	Cheyenne Moseley	
	Name of Person	
	Legalzoom.com, Inc.	
	Firm/Company	75 <b>5</b>
	100 W. Broadway Suite 100	LCC
	Address	題号刊
	Glendale, CA 91210	29 28 3886
	City/State and Zip Code	当時に
	srieger1981@gmail.com	10 T 9
For further information	E-mail address: (to be used for future unmust report notification)  concerning this matter, please call:	9:57 STATE LORIDA
Imelda Vasquez	323 962-8600 ext 7950	
Name	of Person Area Code Daytime Telephone Number	

■ \$55.00 Filing Fee & Certified Copy

(additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

□ \$30.00 Filing Fee &

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STREET/COURIER ADDRESS:

□ \$60.00 Filing Fcc,

Certificate of Status & Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

To: Page 4 of 6

10/29/2015 8.41:28 AM PDT

13239628300 From: Amanda Sando

757 855 0033

GILDERSLEEVE

11:33:52 a.m.

10-28-2015

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

T47 Properties LLC		
(Name of the Limited Liab (A I-lor	ullity Company as it now appears on our reco ida Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability	Company were filed on 07/01/2011	and assigned
Florida document number L11000076332	<u>-</u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the words "	Limited Linbility Company," the designation "l	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET ADI	(223ND	NEW SE
		FAR B T
		1 2 I
Enter new mailing address, if applicable:		图 6 是
(Malling address MAY BE A POST OFFICE BOX)		79 1
		57. 9
	<del></del>	ST 5
B. If amending the registered agent and/or registered agent and/or the new registered office ad		
Constitution of the second sec	13 1 5-12 113-13-	
Name of New Registered Agent:		
New Registered Office Address:		
	linter Florida street uddr	ress
		Florida
	City	Zip Cod≇

## 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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10/29/2015 8:41:28 AM PDT

13239628300 From: Amanda Sando

757 855 0033

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11:34:17 a.m. 10-28-2015

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Matthew Massuto	11311 MARION LAKE CT.	<b>☑</b> Add
		RIVERVIEW, FL 33569	☐ Remove
		<del></del>	
			□ Remove
		<del></del>	Nega September 1
			ALLAHASSEE
			TIST B
			D Add S
			Remove
			□ Add
			Remove
		<del></del>	
		P. F. T.	D Add
			□ Remove

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	, if necessary.,
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orive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than	_ (optional) 90 daya efter
this document is filed by the Florida Department of State)	
10/28/2015	
Sattle !	
Signature of a member or authorized representative of a member	,

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Filing Fee: \$25.00