L110001171267

(Requestor's Name)	
(Address)	·
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAHL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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Office Use Only



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January 22, 2024

STACEY ANN JOY GOTTDENKER 1305 CLEVELAND AVE, STE A WILDWOOD, FL 34785

SUBJECT: DOWN HOME PROPERTIES, LLC

Ref. Number: L11000127267

We have received your document for DOWN HOME PROPERTIES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida profit corpoation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett Regulatory Specialist II

Letter Number: 024A00001307

COVER LETTER

TO: Registration Section Division of Corpora			
SUBJECT: DOW	Have Pra	Derties LLC Liability Company	
The enclosed Articles of Amer	ndment and fee(s) are submit	ted for filing.	
Please return all corresponden	ce concerning this matter to t	he following:	
	Stacey Av	Name of Person	iker
	Dawn 1	time Properties	, LLC
7	305 cleveland	Address Address	
_	Wildund,	T2 34785 City/State and Zip Code	
_	Stacey @ da E-mail Aldress! (to b	e used for future annual report notific	ation)
For further information concer	rning this matter, please call:		
Stacy And J Name of Pers	ay Gottdonker	at (<u>353</u>) <u>753-00</u> Area Code Daytime T	Telephone Number
Enclosed is a check for the fol	lowing amount:		
□ \$25.00 Filing Fee	l \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Secti Division of Corpo P.O. Box 6327		Street Address: Registration Secti Division of Corpo The Centre of Tal	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limit	red Liability Company as it now appears on our re (A Florida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited L	iability Company were filed on	and assigned
Florida document number <u>L1100012</u>	1267.	
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name o	f the limited liability company here:	
The new name must be distinguishable and contain the v	words "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	eable:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	
B. If amending the registered agent and/or ragent and/or the new registered office addre		enter the name of the new regist
Name of New Registered Agent:	Stacey Ann Joy Ge 1305 Cleveland Ave	Hodenker
New Registered Office Address:	1305 Cleveland Ave	Ste A
	Wildward	. Florida 34785

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>	Address	Type of Action
MGR	Stacey Ann Jay Gorraenkir	1305 Cleveland Ave. SICA, Wildwood FZ 31785	🗆 Xdd
	Conjunt (pur		□Remove
			Change
AMBR	Vickie Knight-Joy	1305 Cleveland Ave, Ste A	D∕Ádd
		Wildwood, F. 34785	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add :
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Channe

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	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Note: I	re date, if other than the date of filing:	5.0207 (3) ted as the
he record ord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afte d.	er the
Dated _	Signature of a member or authorized representative of a member	
	Stacey Ann Jay Cattalenker	

Filing Fee: \$25.00