112000007306

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B. BOSTICK
FEB - 8 2013
EXAMINER

COVER LETTER

TO:

Registration Section · Division of Corporations

CAP PROPERTY MANAGEMENT SERVICES, LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTHONY PIO COSTA III

Name of Person

Firm/Company

2848 NE 38TH STREET

Address

FORT LAUDERDALE, FL 33316

City/State and Zip Code

MAINOFFICE@PIOCOSTA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTHONY PIO COSTA III

,973_,575-1706

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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 Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAP PROPERTY MANAGMENT SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Florida document number <u>L1200007306</u>	y Company were filed on JANUAF	RY 13, 2012 and assigned
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the l	diment is submitted to amend the following: Inding name, enter the new name of the limited liability company here: DA CAP PROPERTY MANAGEMENT SERVICES LLC In me must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation In principal offices address, if applicable: In office address MUST BE A STREET ADDRESS) In mailing address, if applicable: In office address MAY BE A POST OFFICE BOX) In the designation "LLC" or the abbreviation of the new lagent and/or registered office address on our records, enter the name of the new lagent and/or the new registered office address here:	
FLORIDA CAP PROPERTY MANAGEME	NT SERVICES LLC	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," th	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	7A C 13
		B 1
Enter new mailing address, if applicable:		Lid
(Mailing address MAY BE A POST OFFICE BOX)		
	•	A
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flo	orida street address
<u> </u>		, 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

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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:

MGRM = Managing Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
		 	Add
			Remove
			Add
			Remove
			Kemove
			
		<u></u>	Add
			Remove
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			Remove H 12: 27
			: 27
			Add
			Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	
	Signature of a member or authorized representative of a member
	ANTHONY PIO COSTA III
	Typed or printed name of signee

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Filing Fee: \$25.00

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