L12000027368

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SU. Charleson MAR 2 6 2013

COVER LETTER

TO: Registration Section
Division of Corporations

Cross Border Property Management LLC

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:

Ricky Lautan

Name of Person

Cross Border Property Management

Firm/Company

428 Chestnut Street

Address

Clermont Florida 34711

City/State and Zip Code

crossborderproperty@gmail.com

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

For further information concerning this matter, please call:

Ricky Lautan

352₃556-1559

Name of Persor

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

FILED

2013 MAR 25 PM 12: 36

SECRETARY OF STATE
TALLAHASSER, FLORIDA

Cross Border Property Manager		r records)
(A Florida	ty Company as it now appears on ou Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability	Company were filed on 02/27/20	12 and assigned
Florida document number L12000027368		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the wo	ords "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regi registered agent and/or the new registered office ad		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	· -	
	Enter Flor	ida street address
	Civi	, 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

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:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Mgrm	Danny Chetram	3675 Peaceful Valley Dr	Add
		Clermont FL	Remove
·			Add Remove
			Add Remove
			AddRemove
 -			Add Remove
			Add Remove

D. If amending any other information	in, enter change(s) here: (Attach additional sheets, if necessary.)
Dated March 21	2013
-	ure of a member or authorized representative of a member
Ricky Lautan	
	Typed or printed name of signee

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Filing Fee: \$25.00

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