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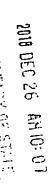
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Office Use Only



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M. MILLIGAN JAN 07 2019

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: DESOLEIL PROP	ERTIES, LLC	
DOCUMENT NUMBE	CR:		
		bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
S	TEPHEN L. OSTHEIMER		
_		Name of Contact Persor	
1.	DESOLEIL PROPERTIES I	LC	
_		Firm/ Company	<u> </u>
7	830 CORTEZ ROAD WES	If fee are submitted for filing. Ing this matter to the following: THEIMER Name of Contact Person PERTIES LLC Firm/ Company DAD WEST Address LORIDA 34210 City/ State and Zip Code ail.com s: (to be used for future annual report notification) atter, please call: at (941 761-8353	
_		Address	
E	BRADENTON, FLORIDA 3	34210	
-		City/ State and Zip Code	<u> </u>
sunshir	ietaxservice@gmail.com		
	- -	sed for future annual report	politication)
	15 Mari addi 250. (15 176 d.	ou to ratare uman report	
For further information of	concerning this matter, pleas	se call:	
STEPHEN L OSTHEIM	AER	941	761-8353
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for (the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is	Certificate of Status Certified Copy (Additional Copy
Amen Divisi P.O. F	ng Address dment Section on of Corporations Box 6327 lassee, FL 32314	Amend Divisio Clifton	ment Section n of Corporations Building

Tallahassee, FL 32301



October 29, 2018

DESOLEIL PROPERTIES LLC STEPHEN L. OSTHEIMER 7830 CORTEZ ROAD WEST BRADENTON, FL 34210

SUBJECT: DESOLEIL PROPERTIES LLC

Ref. Number: L12000027689

We have received your document for DESOLEIL 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 Corporation, but your entity is a Limited Liability Company. 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) 245-6051.

Michelle Milligan Senior Section Administrator

Letter Number: 418A00022255

COVER LETTER

Division of Corporations
SUBJECT: Deso ei Properties, LCC Name of Limited Libility Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Stephen Ostheimer
Desoleil Properties LLC
1830 Cortez Road West
Pradenton Pl 34210 City/State and Zip Code Sunshinetaxsenice@amail.com
E-mail address: (to be used for future annual report no ification)
For further information concerning this matter, please call:
Stephen Ostheimer at (419) 756-355 Area Code Daytime Telephone Number
Enclosed is a check for the following amount: (Already Paid)
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

	OF	111 A
Desolal Pro	perties LLC	2018 DEC 26 AM 10:07
(<u>Name of the Limited Liability Con</u> (A Florida Limit	ngany as it now appears on our records: ed Liability Company)	OF 10:07
The Articles of Organization for this Limited Liability Compa	ny were filed on <u>2/27/20</u>	17 and assigned
Florida document number <u>L12 000027689</u>		11.00
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	.	
(Principal office address MUST BE A STREET ADDRESS)		
	· · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	 	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	rida
	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 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Au	thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MOR	Mary Kucha	1830 Cortez Road West Bradenton, Fl 34210	Add
		Bradenton, FL 34210	Remove
			Change
			Remove
			Change
			Remove
			Change
			□ Add
			Remove
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			□ Remove
			Change
			□ Add
			_□ Remove
			Change

fective date, if other than the date of filing:	-					
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Filing Fee: \$25.00