

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Ru	siness Entity Name)	<u> </u>
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(Do	cument Number)	
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B. BOSTICK

AUG - 2 2012

EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJI	R CT•	58TH STREET	APARTMENTS, LI	_C	
5020			ited Liability Company	•	
		Amendment and fee(s) are sub	_	,	
			TONY D NGUYEN	•	
			Name of Person		-
		58TH S	TREET APARTMENTS	, LLC	
			Firm/Company		-
			9418 ASHMORE LN.		
			Address	· · · · · · · · · · · · · · · · · · ·	_
					T.
			ORLANDO, FL 32825 City/State and Zip Code		12 AUG -1
		TONYNGUYEN10@GMAIL.COM		5 5	
		E-mail address: (to be used for future annual report notification)			<u>11</u>
For fu	rther information	concerning this matter, please o	eall:		PH 12: 4.1
	то	NY NGUYEN	at (407)	780-9116	U 112: 41 STATE FLORID
	Name (of Person	Area Code & D	aytime Telephone Numbe	
Enclos	sed is a check for t	the following amount:			
	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	closed) Certifie	ate of Status &
		ING ADDRESS:	STREET/CO Registration S	DURIER ADDRESS: Section	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

58TH	STREET APARTMENTS,	, LLC	
(Name of the Limite	d Liability Company as it now appea A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited I	3/19/2012	and assigned	
Florida document number L1200003	37773		
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liability company he	<u>ге</u> :	
The new name must be distinguishable and end w "L.L.C."	rith the words "Limited Liability Compa	any," the designation "	LLC" or the abbreviation
Enter new principal offices address, if appli	icable:		12 A
(Principal office address MUST BE A STRE	ET ADDRESS)		HASS -
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and registered agent and/or the new registered of		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:	TONY D NGUYEN		
New Registered Office Address:	9418 ASHMORE LN.	· · · · · · · · · · · · · · · · · · ·	
	En	nter Florida street add	dress
	ORLANDO	, 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 Flapter 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 A	<u>ction</u>
MGRM	DUNG T NG	GUYEN	9418 ASHMORE LN. ORLANDO, FL 32825	Add Remove	
MGRM_	TONY D NG	UYEN	9418 ASHMORE LN. ORLANDO, FL 32825	_	
				Add Remove	
				Add Remove	
	 			Add Remove	
	 			Add Remove	
D. If amend	ing any other info	ormation, enter chang	ge(s) here: (Attach additional sheets, if necessary.). AHASSEE. FLORID	- 1	Ti Ti
Dated	JULY 30	Signature of a membe	or authorized representative of a member		
			ONY D NGUYEN I or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00