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EXAMINER

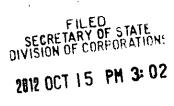
## **COVER LETTER**

Registration Section
 Division of Corporations

Staples Properties 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: Jeffrey Staples Name of Person Firm/Company 632 N C Street Address Lake Worth, FL. 33460 City/State and Zip Code manamif@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Steven Staples 423-7949 Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fec & \$60.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Sta	aples Propei	rties LLC		
( <u>Name of the Limited Liz</u> (A Flo	<b>ability Company s</b> orida Limited Liab	is it now appear ility Company)	rs on our records.)	
The Articles of Organization for this Limited Liabi Florida document number	ility Company we		May 09, 2012	and assigned
This amendment is submitted to amend the followi	ing:		,	
A. If amending name, enter the new name of th	e limited liabilit	y company hei	<u>'e</u> :	
The new name must be distinguishable and end with the "L.L.C."	he words "Limited	Liability Compa	nny," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicabl	le:			
(Principal office address MUST BE A STREET A	ADDRESS)			
	-			
Enter new mailing address, if applicable:	_			
(Mailing address MAY BE A POST OFFICE BO	<u>)X)</u> _			
B. If amending the registered agent and/or registered agent and/or the new registered office		e address on (	our records, <u>enter (</u>	the name of the new
Name of New Registered Agent:				
New Registered Office Address:			nter Florida street add	tress
_		, Florida		
No. Decision of Association (Company) of the contract Decision in the c		City		Zip Code
New Registered Agent's Signature, if changing Reg	ustered Agent:			
I hereby accept the appointment as registered a the provisions of all statutes relative to the prop accept the obligations of my position as register being filed to merely reflect a change in the reg company has been notified in writing of this cha	per and complete ered agent as pro gistered office ad	e <mark>performan</mark> ce ovided for in C	of my duties, and I d hapter 608, F.S. Or,	am familiar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Steven Staples	632 N C Street Lake Worth, FL 33460	✓ Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add
D. If amen	ding any other information, o	enter change(s) here: (Attach additional sheets, if neces	sary.)
_			
_	Contombor 47	ر. د. مدم	SECRETARY OF COPINISION OF COP
Dated	September 17		ORFORA ORFORA
	Signature	of a member or ambarized representative of a member  Jeffrey Staples	PH 3: 02
		Typed or printed name of signee	· · · · · · · · · · · · · · · · · · ·

Page 2 of 2

Filing Fee: \$25.00