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D. BRUCE
DEC 26 2012
EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

Cole Property Services, 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:

Gerry Valdes-Sanchez, CPA

Name of Person

Hyde Park Accountants, PA

Firm/Company

2305 W. Morrison Ave.

Address

Tampa, FL 33629

City/State and Zip Code

Gerry@hydeparkaccountants.com

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

For further information concerning this matter, please call:

Gerry Valdes-Sanchez

813,259-4529

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

(Name of the Limited		ny as it now appears on ou Liability Company)	r records.			
The Articles of Organization for this Limited L Florida document number L12000092971				and assign	ed	
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name o	f the limited lial	oility company here:				
Cole Property Services Old Florida, L	.LC					
The new name must be distinguishable and end wi "L.L.C."	th the words "Lim	ited Liability Company," the	e designation "LLC"	or the abbi	eviat	ion
Enter new principal offices address, if applic	able:	N/A		340		_
(Principal office address MUST BE A STREE	T ADDRESS)	········		F 3	20	
		·			<u>~</u>	-
					_	
Enter new mailing address, if applicable:		N/A			E E	_55
(Mailing address MAY BE A POST OFFICE	BOX)		 		<u>ب</u>	-
				3771	J	_
B. If amending the registered agent and/ registered agent and/or the new registered or			cords, <u>enter the n</u>	ame of t	<u>he n</u>	<u>ew</u>
Name of New Registered Agent:						_
New Registered Office Address:	N/A					_
		Enter Flor	rida street address			
	 	~.	, Florida			_
		City	Zi	p 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, <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> Type of Action <u>Address</u> N/A Remove Remove Remove Remove Remove

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<u>/A</u>
ateu <i>De</i>	cember 17, 2012.
•	Sam R. Col
	Signature of a member or authorized representative of a member
	Mr. James R. Cole
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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