# L17000019522

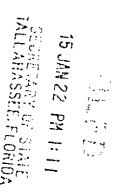
. (Re	equestor's Name)	
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### **COVER LETTER**

TO: Registration Section Division of Corpo			
SAZ Prope	erties, LLC		
SUBSECT.	Name of Limit	ed Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are subm	nitted for filing.	
Please return all correspond	ence concerning this matter to	o the following:	
	Yuliya Sidorevskaya		
		Name of Person	
	REOSource Manage	ment	
		Firm/Company	
	1700 Kennedy Cause	eway, Suite 160	
		Address	
	North Bay Village, FL	_ 33141	
		City/State and Zip Code	
	julie@juliesrealty.net		
T 0 1 1 0 1	·	be used for future annual report notificati	on)
For further information con	cerning this matter, please cal	II:	
Yuliya Sidorevskaya		305 751-6400 at ()	
Name of F	erson	Area Code Daytime Tel	lephone 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

SAZ Properties, LLC	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L13000019522	were filed on 02/06/2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and end with the words "Limited Liab	oility 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:	REOSource Management
(Mailing address MAY BE A POST OFFICE BOX)	1700 Kennedy Causeway, Suite 130
	North Bay Village, FL 33141
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her  Name of New Registered Agent:	ffice address on our records, enter the name of the re:
New Registered Office Address:	
	Enter Florida street address , Florida , Florida
	City Cale : """
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete	

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member **Type of Action** Address Title Name MGR Yuliya Sidorevskaya REOSource Management ■ Add 1700 Kennedy Causeway, Suite 160 □ Remove North Bay Village, FL 33141 □ Add ☐ Remove □ Remove □ Add \_□ Add □ Remove

Ņ/A`	
	,
fective date, if other than t e effective date must be specific, c e date this document is filed by the	the date of filing: (option cannot be prior to date of receipt or filed date and cannot be more than 90 days after a Florida Department of State)
October 31	2014
ated	2571
ated	VAlur
ited	Signature of a member or authorized representative of a member
Val Zevel	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00

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