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COVER LETTER

TO:		istration Sed Ision of Corp			
CHRIE	·CT·	BASIC PRO	PERTY MANAGEMENT, L	LC	
SUBJE	~ 1.		Name of Lim	ited Liability Company	
SUBJECT: BASIC PROPERTY MANAGEMENT, 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: VICTOR E DELGADO Name of Person BASIC PROPERTY MANAGEMENT, LLC Firm/Company 1110 BRICKELL AVENUE, SUTTE 402-5 Address MIAMI, FL 33131 City/State and Zip Code VE.DELGADO@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: VICTOR E DELGADO Name of Person Aren Code Daytime Telephone Number Enclosed is a check for the following amount: \$\begin{array}{c} \text{S55.00 Filing Fee} \text{ \$\begin{array}{c} \text{S60.00 Filing Fee}, \$\begin{a					
The end	losed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn	all correspor	ndence concerning this matter	to the following:	
			VICTOR E DELGADO		
Name of Person					
			BASIC PROPERTY MAN	AGEMENT, ILC	
Firm/Company					
1110 BRICKELL AVENUE, SUITE 402-5					
				Address	
			MIAMI, FL 33131		
			VE.DELGADO@YAHOO.		
			E-mail address: (t	to be used for future annual report notification	ation)
For furt	her in	formation co	ncerning this matter, please ca	di:	
VICTOR E DELGADO					
	_	Name of	Person		elephone Number
Enclose	d is a	check for the	e following amount:		
\$25.	.00 Fi	ling 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

BASIC PROPERTY MANAGEMENT,				
(<u>Name of the Limited Li</u> (A F	ability Compa orida Limited I	ny as it now appears on our recor liability Company)	<u>(ds.</u>)	
The Articles of Organization for this Limited Liabili	ty Company	were filed on 04/01/2013	and as	signed
Florida document number 1.13000047414	··			
his amendment is submitted to amend the followin	g:			
. If amending name, enter the new name of the	limited liab	ility company here:		
 				
he new name must be distinguishable and contain the words	'Lamited Liabil		C" or the abbreviation "L -	.L.C."
nter new principal offices address, if applicable	:	1110 BRICKELL AVENUE		_==
Principal office address MUST BE A STREET AL	DDRESS)	SUITE 402-5	~	<u>≾</u> s
		MIAMI, FL 33131	EP	뎙
			21	75
nter new mailing address, if applicable:		1110 BRICKELL AVENUE	- A	0.0
Mailing address MAY BE A POST OFFICE BOX	7 1	SUITE 402-5	6: 	<u> </u>
Training take CSS MAT BL AT OST OF FICE BOX	L	MIAMI, FL 33131		<u></u>
. If amending the registered agent and/or registered agent and/or the new registered office: Name of New Registered Agent:			s, <u>enter the name</u>	of the
	IN RDICKEI	L AVE, SUITE 402-5	-	
New Registered Office Address:	- DRICKEL	Enter Florida street addre		
	LAXO			
<u>M</u>	IAMI		orida 33131	
		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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	VICTOR E DELGADO	1110 BRICKELL, AVENUE	
		SUITE 402-5	Add
		3(111) 402-3	□ Remove
		MIAMI, FL 33131	
			■ Change
			□ Remove
			Change
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ffective date, if other than the date of filing:	(antinual)	
an effective date is listed, the date must be specific and cannot be prior to date of	filing or more than 90 days after filing.) Pursua	ant to 605.02
ote: If the date inserted in this block does not meet the applicable static current's effective date on the Department of State's records.	utory filing requirements, this date will no	ot be listed:
e record specifies a delayed effective date, but not an eff The 90th day after the record is filed.	fective time, at 12:01 a.m. on th	e earlier
nted		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00