## L13000059852

Office Use Only



500331549365

07/15/19--01035--017 \*\*25.00

## COVER LETTER

TO: Registration Se Division of Cor					
	S THREE INVESTMENTS, LI	_C			
SUBJECT:	Name of Limit	ted Liability Company			
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.			
Please return all correspo	ondence concerning this matter t	o the following:			
	HEIDI PRENDES				
		Name of Person	<del></del>		
	A+ MINI STORAGE				
		Firm/Company			
	12200 SW 117TH AVE				
		Address			
	MIAMI, FL 33186				
	HPRENDES@APLUSMIN		<del></del>		
	E-mail address: ()	to be used for future annual report noul	ication)		
For further information	concerning this matter, please ca	1  1			
HEIDI PRENDES	305 232-7198				
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

BROTHERS THREE INVESTMENTS, LLC

company has been notified in writing of this change.

FILED

		as on our recourts Mr. 12 12 5. 40			
The Articles of Organization for this Limited L Florida document number <u>L13000059852</u>	iability Company were filed on 0-	1/23/2013 TO A PAIN ET TO A PAIN (ALLAHASOFE) and assigned			
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name of	of the limited liability company h	ere:			
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applie	cable:				
(Principal office address MUST BE A STREE	ET ADDRESS)				
(Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and registered agent and/or the new registered of	/or registered office address o	n our records, <u>enter the name of the new</u>			
Name of New Registered Agent:	STEVEN H. NATURMAN				
New Registered Office Address:	9500 S. Dadeland Blvd. Suite 601				
	Enter Florida street address				
	MIAMI	Florida 33156 Zip Code			
	City	Zip Code			
New Registered Agent's Signature, if changing	Registered Agent:				
I hereby accept the appointment as register	ed agent and agree to act in this	capacity. I further agree to comply with the			

If Changing Registered Agent. Signature of New Registered Agent

Page 1 of 3

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Ma AMBR = Au	mager thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			☐ Change
<del></del>			
			🗆 Remove
			Change

		□ Add
		🗆 Remove
		Change
<del></del>		
		🗆 Remove
		_□ Change
<u>.</u>		_□ Add
		□ Remove
		Change
		🗆 Add
		_□ Remove
		_□ Change
		_□ Add
		_□ Remove
		_□ Change

									_
									_
									_
									_
									_
									_
									_
									_
			<del></del>						-
			<u> </u>			<del></del>			-
									_
<del></del>									-
									-
									_
	<del></del>			<del></del>					_
_						-	_,		_
					<u></u>				_
								÷	
Note: If a	date, if other we date is listed, the date inserte 's effective dat	d in this bloc	k does not n	neet the appl	licable statute	ling or more than ory filing requi	(option: 90 days after fili rements, this da	al) ng.) Pursuant to 60 ite will not be lis	15.0207 ( sted as t
	d specifies a Oth day afte			ate, but r	not an effe	ctive time, a	at 12:01 a.n	ı. on the earl	ier of:
Dated	July	3		Para W	W.	h=			
		Sı	gnature of a r	nember or au	thorized repre	sentative of a me	mber		

Page 3 of 3

Filing Fee: \$25.00