L13000 74970

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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COVER LETTER

Name of Person

TO: Registration Section
Division of Corporations

DEBDOU PROPERTIES, LLC

Nathalie TAIEB

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:

MAILING ADDRESS:

Division of Corporations

Tallahassee, FL 32314

Registration Section

P.O. Box 6327

 $\mathbf{1} f_{i,k,k}$

	1130 Rush \$	Street	
		Address	
	Celebration,	FL 34747	
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	ariel_marciano@	hotmail.com	
	E-mail address: (to be used for future annual report not	fication)
For further information	concerning this matter, please c	all:	
Nathalie TA	VIED.	407 740 C	052
Namane 17	-{IICD	407,719-9	0000
	of Person	at ()	ne Telephone Number
	of Person	at ()	

STREET/COURIER ADDRESS:

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301



September 24, 2014

NATHALIE TAIEB 1130 RUSH STREET CELEBRATION, FL 34747

SUBJECT: DEBDOU PROPERTIES LLC

Ref. Number: L13000074970

We have received your document for DEBDOU PROPERTIES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The effective date must be specific and cannot be prior to the date of filing.

Amendment was received on 09/22/14

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 314A00020498

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2014 OCT -9 PM 12: 35

SECRETARY OF STATE TALLARASSEE, FLOREDA

Zip Code

(Name of the Limi	ted Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L Florida document number <u>L13000074970</u>	iability Company	were filed on 05/22/2013 and assigned	
his amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liab	oility company here:	
he 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:		1130 Rush Street	
Principal office address MUST BE A STREET ADDRESS)		Celebration, FL 34747	
		1130 Rush Street	
Enter new mailing address, if applicable:		Celebration, FL 34747	
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and	or registered o	ffice address on our records, enter the name of the	
egistered agent and/or the new registered o	ffice address her	<u></u>	
Name of New Registered Agent:			
New Registered Office Address:	1130 Rush		
		Enter Florida street address	
	Celebration	n , Florida 34747	

New Registered Agent's Signature, if changing Registered Agent:

DEBDOLL PROPERTIES LLC

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.

City

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			
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			
			□ Add
			□ Remove
			Add
			□ Remove
		····	
			Add
			☐ Remove
			Remove
			
			□ Add
			☐ Remove

• •	Registered Agent but the principal office
address and the Regist	ered Agent address changes to
1130 Rush Street in Ce	elebration, FL 34747
	
E. Effective date, if other than the date of filir (The effective date must be specific, cannot be prior to d the date this document is filed by the Florida Department	date of receipt or filed date and cannot be more than 90 days after
Dated October 1st, 2014	2014
Si	Marico
Ariel MARCIANO	a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

