# L13000094745

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SECRETARY OF STATE
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JUL 22 2013 J. BRYAN

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

## TELLUS PROPERTIES LLC

SUBJECT:

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:

## DAWN STECKELBERG

Name of Person

# BARKEL INVESTMENTS, LLC

Firm/Company

## 1105 CAPE CORAL PKWY E # C

Address

## CAPE CORAL, FL 33904

City/State and Zip Code

### daniel@assetquest.com

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

For further information concerning this matter, please call:

## Dawn Steckelberg

<sub>a,/</sub>239<sub>\</sub>541-8448

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

#### **TELLUS PROPERTIES LLC**

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company v	were filed on 07/02/2013	and assigned
Florida document number <u>L13000094745</u>		
This amendment is submitted to amend the following:		SECRETAL PORTO
A. If amending name, enter the new name of the limited liabil	lity company here:	SSE P
		The state of the s
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation	"LLC" of the abbrecation
Enter new principal offices address, if applicable:		7
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		,
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here		the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street aa	ldress
	, Florida	
	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 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>	Address	Type of Action
MGRM	Daniel Barres	1105 Cape Coral Pkwy E	Add
		Suite C	Remove
		Cape Coral, FL 33904	
MGR	BARKEL INVESTMENTS, LLC	1105 Cape Coral Pkwy E	Add
		Suite C	Remove
		Cape Coral, FL 33904	<del></del>
			_ Add
			Remove
			-
		TALLAR ALLAR	**************************************
		AASSEI	Remove
		EF STA	₹ ED
			Add Add
			Remove
		·	
			Add
			Remove

If amendi	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
· .	· · · · · · · · · · · · · · · · · · ·
<sub>ed</sub> July	· 17
	Signature of a member of authorized representative of a member
	Daniel Barres
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED AN I: 02 SECRETARY OF STATE SECRETARY OF STATE