L13000101294

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(Ad	ldress)	
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APR - 3 2014 T. BROWN

COVER LETTER

TO:

Registration Section , Division of Comporations

CRK2 Properties, 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:

Theresa Kelly	
Name of Person	_
	_
Firm/Company	
37206 Clinton Avenue	
Address	
Dade City, Florida 33525	
City/State and Zip Code	
Theresakellypa@yahoo.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Kimberly Shoupe

Name of Person

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 a calc Division of Corporations Clifton Building 5775 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

TATE OF SEE TO OF OF

CRK2 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 L	iability Company were file	ed on July 17, 2013	and assigned
Florida document number L13000101294	<u> </u>		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability con	<u>ipany here</u> ;	
The new name must be distinguishable and end with the	words "Limited Liability Comp	pany," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:		
(Principal office address MUST BE A STREI	ET ADDRESS)		
			· _
Enter new mailing address, if applicable:	;. · · · .	*	**
(Mailing address MAY BE A POST OFFICE	BOX)		,
			;
.	·		
B. If amending the registered agent and registered agent and/or the new registered o		dress on our records, enter	r the name of the ne
•		·	,-
Name of New Registered Agent:	Kimberly A. Shoup)e	
New Registered Office Address:	37206 Clinton Ave	enue	
TOW ROGISSION OTHER PROBLEMS.	•	Enter Florida street address	
	Dade City	, Florida 3	33525
	City	, riorida _	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 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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Casey R. Karppe	37206 Clinton Avenue	≡ Add
		Dade City, Florida 3352	25 Remove
MGRM	James E. Kelly	37206 Clinton Avenue	
		Dade City, Florida 3352	
		<u>. </u>	
	·		Add
	**************************************	<u> </u>	□ Remove
	· .		Add
			□ Remove
		<u></u>	
			Add
			□ Remove
			□ Add
			Remove

Effective date, if other than the date of The effective date must be specific, cannot be pric the date this document is filed by the Florida Dep	or to date of receipt or filed date and cannot be more than 90 days after
The effective date must be specific, cannot be price the date this document is filed by the Florida Dep	or to date of receipt or filed date and cannot be more than 90 days after
the date this document is filed by the Florida Dep Dated March 26	or to date of receipt or filed date and cannot be more than 90 days after partment of State)

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Filing Fee: \$25.00