L13000130591

(Requestor's Name)
(Address)
(Address)
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,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FALL AHASSEE, FLORIDA

APR 26 2019 T SCHROEDER

COVER LETTER

TO:	Registration Sec Division of Corp						
SUBJEC	Property 6						
SO DJEA	Л: <u></u>		ited Liability Company				
The encl	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.				
Please re	nurn all correspor	ndence concerning this matter	to the following:				
		Alex Montero					
		-	Name of Person				
			Firm/Company				
		10521 SW 140 Street					
			Address				
		Miami, F1, 33176					
		City/State and Zip Code					
		amontero47 <i>à</i> belisouth.net					
		E-mail address: (to be used for future annual repo	ort notification)			
For furth	er information co	oncerning this matter, please co	all:				
	A)(xx	Mank in	at (_30 <u></u>)	968 - 6274			
	Name of	Person	Area Code	Daytime Telephone Number			
Enclosed	I is a check for th	e following amount:					
■ \$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy tadditional copy is enclose	□ \$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 2064 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Property 65-67 LLC		
(Name of the Limited Liability (A Florida	Company as it now appears on our record- Limited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Co Florida document number <u>1.13000[3059]</u>	ompany were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company." the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR.	<u>ESS)</u>	PR T
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		AH B FLORIDA
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		s, enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		
	Emer Florida sweet addres	s,
	Flo	orida
	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>	<u>Address</u>	Type of Action
MGR	Alex Montero	10521 SW 140 Street, Miami, FL 33176	Add
			□ Remove
	Dayanara Montero	10521 SW 140 Street, Miami, FL 33176	Add
			Change
			<u>2</u>
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fective date, if other than th	e date of filin	10:		((optional)	
n effective date is listed, the date mo ite: If the date inserted in this l	st be specific an	id cannot be prior to	date of filing or	more than 90 days	after filing.) Pursi	iant to 605.020 of be fisted :
cument's effective date on the I			,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	g respinionis		· · · · · · · · · · · · · · · · · · ·
record specifies a delaye The 90th day after the re			an effective	time, at 12:0)1 a.m. on th	ie earlier (
ted April 12		2019				
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Typed or printed name of signee

Filing Fee: \$25.00