

L13000 159641

(Requestor's Name)

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(City/State/Zip/Phone #)

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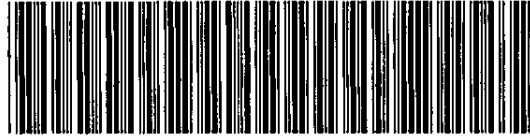
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 22 2015
J. HARRIS

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: **LOCAL PROPERTY 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:

HARLAND F. SIMONDS, JR.

Name of Person

Firm/Company

2252 ALTAMONT AVE.

Address

FORT MYERS, FL 33901

City/State and Zip Code

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

For further information concerning this matter, please call:

HARLAND F. SIMONDS, JR.

Name of Person

at (**239**)

Area Code

839.8201

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**

LOCAL PROPERTY 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 were filed on 11/13/2013 and assigned
Florida document number L13000159641.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited 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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			☐ Add
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TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

The Articles of Organization are amended by adding a new Article

numbered "ARTICLE VII." The text of ARTICLE VII is set forth on the attached

additional sheet and is incorporated here in.

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

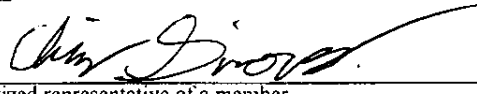
Dated

APRIL 2, 2015



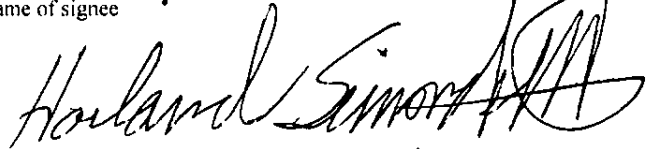
Signature of a member or authorized representative of a member

HARLAND F. SIMONDS, JR.



Christopher A. Simonds

Typed or printed name of signee



Harland Simonds III

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Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

ARTICLE VII
TO
LOCAL PROPERTY LLC,
A Florida Limited Liability Company

The management of this limited liability company shall be managed by a manager or co-managers who need not be a member of the company. The manager or co-managers shall be appointed by a majority vote of the members. The manager or each individual co-manager shall have full power and authority to conduct the business of the company, including without limitation, the power and authority to sell, convey, encumber, manage, deal with, and otherwise dispose of both real and personal property of the company, to enter into contracts of any nature on behalf of the company, and open, maintain, and close bank accounts as an authorized signer for the company, to obtain and purchase insurance of any kind or nature for the company, its members or managers. The co-managers may act either jointly or individually (that is to say without joinder of the other co-managers) on behalf of the company.

At the time of Amendment of the Articles of Organization of LOCAL PROPERTY LLC, to create this Article, There are three co-managers of the company and their names are Christopher A. Simonds, Harland F. Simonds III, and Harland F. Simonds, JR. The mailing address of the managers are 229 Brevard St., Fort Myers, FL 33901.

The managers shall serve until such time as the members appoint successor managers or a single manager by majority vote.

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[Handwritten signatures and initials]