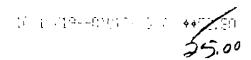
LI4000 021 776

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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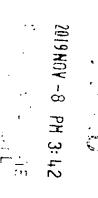
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NOV 0.8 2013







October 29, 2019

JERRY WILLENBORG 2466 POINCIANA CT WESTON, FL 33327

SUBJECT: SHORES BROTHERS PROP MANAGEMENT LLC

Ref. Number: L14000021776

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CERTIFICATE OF LIMITED PARTNERSHIP, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6050.

Letter Number: 919A00022325

Susan Tallent Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Shorts Broth Name of Limi	1/5 Prof Management	LLC
The enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	J	Cry Willenbary	
		Name of Person	
		Firm/Company	
	<u> </u>	166 Poinciana CF	-
	ef-mail address: (t	Nestan F/3335 City/State and Zip Code Villenborn & Cay mond to be used for future annual report notifi	james. com
For further information co	ncerning this matter, please ca		,
J!/// Name/of	Willon borg Person	at (959) 32 - Area Code Daytime	6683 e 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

hures Brot	hers thou		naypme	. 1/	<u>.L(</u>	_	
(<u>Name of the Limited Liabi</u> (A Florid	la Limited Lial	as it now appear pility Company)	rs on our rec	oras.)			
The Articles of Organization for this Limited Liability Florida document number $\frac{424000021776}{1000000000000000000000000000000000000$	Company we	ere filed on	J-7-20.	14	and	assigne	ed
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the lin	nited liabilit	y company ho	ere:				
The new name must be distinguishable and contain the words "Lin	mited Liability	Company," the d	esignation "I	.LC" or the a	bbreviation	"L.L.C.	**
Enter new principal offices address, if applicable:	_	Jerry	Willen	pari			
(Principal office address MUST BE A STREET ADD	RESS)	2467 Weston	POINCIO	100 Cf 33327	7		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	- - -					19NOV -8 PH 3:1	5 6
B. If amending the registered agent and/or registered agent and/or the new registered office ade		e address on	our reco	rds, <u>enter</u>	thernar	reoof (the nev
Name of New Registered Agent:	Jerra	Willen bo Poincikn	rg .				
New Registered Office Address:	2466	Poin CIKA	rida street ada	fruss			
	West			Florida	33327	<u>1</u>	
		Ciiji			zip Ct	ut.	

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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
mor	Frank Willenhorg	20937 NE 38 Th AUD	
		Miami F1 33/80	
			Change
mol	Patricin Willenburg	2466 Poinciana (+ Weston Fl 33327	☑ Add
		Weston F1 33327	□ Remove
			Change
			
			☐ Remove
			☐ Change
			🗆 Add
			□ Remove
			Change
~ ~~			\ Add
			☐ Remove
			Change
			□ Remove
			🗆 Change

-	Patricia Willenberg & Jerry Willenberg are the co-owners of Shores Brothers Prop Management
•	co-owners of Shores Brothers Prop Management
-	50%, /50%.
-	
_	
_	
_	
-	
-	
-	
-	
-	
-	
-	
-	
_	
(If an eff Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	November 3 1. 2019
	Signature of a member or authorized representative of a member
	Jerry Willenborg
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00