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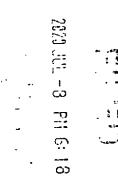
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AUG 20 2020 S. YOUNG

COVER LETTER

TO: Registration Se Division of Cor			
	RTY MANAGEMENT, LLC		
SUBJECT:	Name of Lim	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ndence concerning this matter		
	JONATHAN MOORE		
	<u> </u>	Name of Person	
	AC PROPERTY MANAG	EMENT LLC	
		Firm/Company	
	710 E COLONIAL DRIVI	į	
		Address	
	ORLANDO, FL 32803		
		City/State and Zip Code	
	jamoore@accommercial.co		··· (5 · · · · · · · · · · · · · · · · ·
For further information c	E-mail address: (concerning this matter, please c	to be used for future annual report no all:	uncatori
Loi Lee		321 800-2013	
Name o	of Person	at () Area Code Daytii	me Telephone Number
Enclosed is a check for the	he 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)
<u>Mailing Addres</u> Registration		Street Address: Registration S	ection
Division of C	Corporations	Division of Co	orporations
P.O. Box 632 Tallahassee,		The Centre of 2415 N. Monr	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

AC PROPERTY MANAGEMENT, 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 $\frac{6/17/14}{2}$ Florida document number $\frac{1}{2}$ 14000097523 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 contain the words "Limited Liability Company," the designation "L.L.C." 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

____, Florida ___

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
MGR	JONATHAN MOORE	710 E COLONIAL DRIVE	
		ORLANDO, FL 32803	□ Remove
			■Change
			□Change
			□Add
			Remove
		<u></u>	Change
			
			Remove
	•		Change
			DAdd
			□Remove
			□Change

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on affin	carina data ie li	cook the date t	the date of f	ic and canno	nt be prior to	date of filing	or more than	(optio	nal) filing.) Pursuan date will not	to 605.0207 be listed as
ocume	ent's effectiv	e date on the	e Department	of State's	records.	,				
record is file		delayed offer	ctive date, bu	t not an ef	Tective tim	e, at 12:01 a	i.m. on the c	arlier of: (b)	The 90th da	ny after the
ated _	July 2	<u> </u>		203	20	_ ,				
	ĺ	MA	li							
			Signature	of a member	er or author	ized represent	tative of a me	mber		
			_							