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COVER LETTER

TO: • Registration Section

Division of Cor	rporations	_			
	DAVID PROPERTIES, LLC		• • • • • • • • • • • • • • • • • • •		
80BJP.C.1;	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Jose Cespedes				
		Name of Person			
Star of David,properties, LLC Firm/Company					
Firm/Company 6235 SW 33rd ST Address					
6235 SW 331d ST					
SUBJECT: STAR OF DAVID PROPERTIES, LLC					
City/State and Zip Code					
	-				
	E-mail address: (to be used for future annual report notif	ication)		
For further information of	oncerning this matter, please c	all:			
Jose Cespedes					
Name o	f Person	Area Code Daytime	: Telephone Number		
Enclosed is a check for the	ne foilowing amount:				
\$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy		
Registration Section Division of Corporations		Registration Sec Division of Corp	porations		

COVER LETTER

TO: Registration Section Division of Corporations

STAR SUBJECT:	OF DAVID PROPERTIES, LLC			
30031.7.1.	Name of L	imited Liability Company		
The enclosed Article	es of Amendment and fee(s) are s	ubmitted for filing.		
Please return all cor	respondence concerning this matt	er to the following:		
		Name of Person		
		Firm/Company		
		Address		
		City/State and Zip Code		2022 SE(
	E-mail address	s; (to be used for future annual report no	tification)	SEF
For further informat	ion concerning this matter, please	e call:		28 PH WAY OF MASSI
Na	ame of Person	at () Area Code Daytii	ne Telephone Number	2022 SEP 28 PH 1: 33 SECRETARY OF STATE TALLAHASSEE, FL
Enclosed is a check	for the following amount:			·
■ \$25.00 Filing Fe	ee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Statu Certified Copy (additional copy is enclo	
Division	on Section of Corporations	Street Address: Registration Se Division of Co	rporations	
P.O. Box Tallahass	6327 ee, FL 32314	The Centre of 2415 N. Monro	Tallahassee be Street, Suite 810	

Tallahassee, FL 32303

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	Living trust of Jose Cespedes	6235 SW 33rd ST. Miramar, FL 33023	= Add
			□Remove
			□Add
			□Remove
			□ Change
			□ Add
			□ Remove
			☐ Change
			□Add
			□Remove
			Change
	M		□Add
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ective date, if other than t effective date is listed, the date i e: If the date inserted in this ument's effective date on the	nust be specific and block does not m	cannot be prior to neet the applical	o date of filing or i	nore than 90 days a	iter filing.) Pursuan	a to 605.02 be listed
ord specifies a delayed effectiled.	tive date, but not	an effective tim	ne, at 12:01 a.m.	on the earlier of	(b) The 90th d	ay after th
ed September 15	Ú	2022				
	Signature of a n	rember of author	ized representativ	e of a member		