L14000153764

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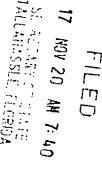


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ACCESS, ____ INC.

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WALK IN

	CERTIFIED COPY	
Ø	РНОТОСОРУ	
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\nearrow	FILING	Amendment
-	FILING BHRNES LVP PRO (CORPORATE NAME AND DOCUMENT	PERTIES, LLC
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COVER LETTER

_	Corporations	
BA SUBJECT:	ES WP PROPERTIES, LLC	
SUBJECT.	Name of Limited Liability Company	
The enclosed Art	es of Amendment and fee(s) are submitted for filing.	
Please return all	respondence concerning this matter to the following:	
	ROBERT SALTSMAN	
	Name of Person	
	ROBERT P. SALTSMAN, P.A.	
	Fim/Company	
	P.O. BOX 2146	
	Address	
	WINTER PARK, FL 32790-2146	
	City/State and Zip Code	
	JUDY@SALTSMANPA.COM E-mail address: (to be used for future annual report notification)	
For further inforr	ion concerning this matter, please call:	
ROBERT P. SA	at ()	_
	ime of Person Area Code Daytime Telephone Number	
Enclosed is a che	for the following amount:	
S25.00 Filing	Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	tatus &

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

BARNES WP PROPERTIES, LLC	
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our records.) i Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number L14000153764	Company were filed on 10/01/2014 and assigned and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ited liability company here:
PROPERTY HOLDING DM, LLC	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1570 Bryan Avenue Winter Park, FL 32787 ===================================
(Principal office address MUST BE A STREET ADDR	Minter Hark, FL 32787:- 7
Enter new mailing address, if applicable:	FILED AND
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or regis registered agent and/or the new registered office add	tered office address on our records, enter the name of the new
Name of New Registered Agent:	arrien Madsen
New Registered Office Address: 15	70 Biyan Avenue_ Enter Florida street address
\mathcal{M}_{i}	Nter Park Florida 32789 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 Changlag Registered Agent, Signature of New Registered Agent

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	JAMES T. BARNES, JR.	1031 W. MORSE BLVD. SUITE 2	
		WINTER PARK, FL 32789	■ Remove
			Change
MSR	Damien Madsen	1570 Bryan Avenue	Æ Add
		1570 Bryan Avenue Winter Park, Fc	Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			D Add
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Effective date, if other than the date of filing:	(optional) ys after tiling.) Pursuant to 605.0207 ts, this date will not be listed as
e record specifies a delayed effective date, but not an effective time, at 12: The 90th day after the record is filed.	:01 a.m. on the earlier of
Dated NOVEMBER 17	
ignature of a member or authorized representative of a member	

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Filing Fee: \$25.00