L14000177008

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL
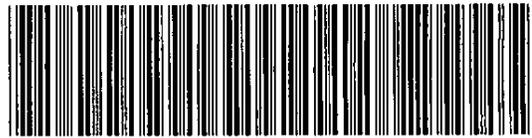
_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

||||||||||||||||||||||||||||||||||||||||

300289720963

09/12/16--01031--005   **25.00

FILED
2016 SEP 12 P 12: 17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren
SEP 13 2016

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: _Scandinavian Properties 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:

Cecilia C. Peres
Name of Person

Western Village LLC.
Firm/Company

1000 5th St Ste. 1303
Address

Miami Beach, FL 33139
City/State and Zip Code

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

For further information concerning this matter, please call:

Cecilia C. Peres   at (_305_) _469-8266_
    Name of Person   Area Code   Daytime Telephone Number

Enclosed is a check for the following amount:

☑ $25.00 Filing Fee   ☐ $30.00 Filing Fee &   ☐ $55.00 Filing Fee &   ☐ $60.00 Filing Fee,
                          Certificate of Status   Certified Copy   Certificate of Status &
                                                         (additional copy is enclosed)   Certified Copy
                                                                                        (additional copy is enclosed)

TO
ARTICLES OF ORGANIZATION
OF

___Scandinavian Properties 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|14|2014__ and assigned

Florida document number __L14000177008__

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 "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)

1000 5th St. Ste 1303
Miami Beach FL 33139

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: Western Village LLC | Cecilia C. Reres

New Registered Office Address: 1000 5th St Ste. 1303
Enter Florida street address

Miami Beach , Florida 33139
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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

<u>**or removed from our records:**</u>

MGR =   Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>

_____ _____ _____ ☐ Add

_____ ☐ Remove

_____ ☐ Change

_____ _____ _____ ☐ Add

_____ ☐ Remove

_____ ☐ Change

_____ _____ _____ ☐ Add

_____ ☐ Remove

_____ ☐ Change

_____ _____ _____ ☐ Add

_____ ☐ Remove

_____ ☐ Change

_____ _____ _____ ☐ Add

_____ ☐ Remove

_____ ☐ Change

_____

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated ___09|07_____, __2016__.

_____
Signature of a member or authorized representative of a member

CECILIA BONES
_____
Typed or printed name of signee

Page 3 of 3

Filing Fee: $25.00