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(Req	uestor's Name)	
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## **COVER LETTER**

	Registration Sec Division of Corp			
SUBJEC'	13260 Stirli	ng Road LLC		
SUBJEC	· · <u>- · · · · · · · · · · · · · · · · ·</u>	Name of Lim	ited Liability Company	
The enclo	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspor	ndence concerning this matter	to the following:	
		Barbara Castro		
			Name of Person	
		Greenback Properties LLC	2	
			Firm/Company	
		10238 W State Road 84		
			Address	<del></del>
		Davie FL 33324		
			City/State and Zip Code	
		BarbieRCastro@aol.com		
		E-mail address: (	to be used for future annual report notif	ication)
For furthe	r information co	oncerning this matter, please ca	all:	
Barbara (	Castro		954 816-0100 at ( )	
	Name of	Person		Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	0 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

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13260 Stirling Road 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 Florida document number <u>L14000180906</u> .	were filed on 03/21/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	13260 Stirling Road	
(Principal office address MUST BE A STREET ADDRESS)	Southwest Ranches FL 33330	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		iter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	a
	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

If amendin	ding Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added		
MGR = N	l from our records: Aanager Authorized Member		20/6 JUL 18 AM 8: 5 Eype of Action  RELEATION OF STATE Add
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ective date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be	be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
ument's effective date on the Department of State's re-	applicable statutory filing requirements, this date will not be listed as the
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record specifies a delayed effective date, bu he 90th day after the record is filed.	ut not an effective time, at 12:01 a.m. on the earlier of:
le 90th day after the record is filed.	
ed,,	
	400
	or authorized representative the member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00