

L14000181003

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

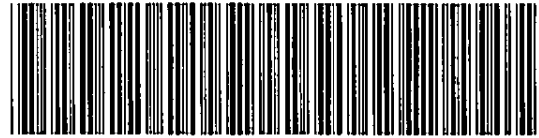
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

2017 AUG 21 P 12:59

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AUG 22 2017

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Property Partners of Lakeland 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:

Robins Noel  
Name of Person

Real Estate Superstore  
Firm/Company

235 W Brandon Blvd STE #211  
Address

Brandon FL 33511  
City/State and Zip Code

Mrnoel1906@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robins Noel at ( 305 ) 798-3425  
Name of Person Area Code Daytime Telephone Number

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TALLAHASSEE, FL 32301

Enclosed is a check for the 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)

**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

Property Partners of Lakeland, 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 11/21/2014 and assigned Florida document number L14000181003.

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)

211 Lake Region Blvd S  
Winter Haven, FL 33881

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

235 W Brandon Blvd  
Suite 211  
Brandon, FL 33511

**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:

Robins Noel

New Registered Office Address:

235 W Brandon Blvd Ste 211

Enter Florida street address

Brandon

City

Florida


33511

Zip Code

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**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.

 Robins Noel

If Changing 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

Title	Name	Address	Type of Action
MGRM	Robins Noel	235 West Brandon Blvd	<input checked="" type="checkbox"/> Add
		Suite 211	<input type="checkbox"/> Remove
		Brandon, FL 33511	<input type="checkbox"/> Change
MGR	D+S Finance Solutions, LLC	5337 N. Saxon Loop Rd	<input type="checkbox"/> Add
		Lakeland, FL 33809	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Bond For Deed Management, LLC	PO Box 7713	<input type="checkbox"/> Add
		Lakeland, Florida 33807	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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 SECRETARY OF STATE

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

Multiple horizontal lines for amending information.

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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 5/30/17

Signature of a member or authorized representative of a member

David Dey Mgrm D+J Finance Solutions

Typed or printed name of signee