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DEPARTMENT OF SAME DIVISION OF LOC. LOC. NO.

5 APR 17 PH 2: 47

J. HARRIS

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: <u>Colden (edux Properties, LLC.</u> 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:
Andrew J. Matella. Name of Person
Golden Codar Properties, LLC.
3534 Mediterra Dr.
Cle Comon L, F. C. 34711 City/State and Zip Code
City/State and Zip Code  Cod vo W. Matella Ogma, 1.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Andrev J. Matella at (860) 321 - 4774  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \\$60.00 Filing Fee & Certificate of Status \$\Bigcup \\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  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

Colden Cedal Profest riles (Name of the Limited Liability Compa (A Florida Limited Line)	my as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number 4/50000 46/86	were filed on 03/02/2015	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LI.C" or the		<del></del>
Enter new principal offices address, if applicable:		THE ST	_ `
(Principal office address MUST BE A STREET ADDRESS)		75	ت ريسون د انس
		T. T.	t de la constitución de la const
Enter new mailing address, if applicable:		<u> </u>	_
(Mailing address MAY BE A POST OFFICE BOX)		- Pin -	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		r the name of the	<u>hew</u>
Name of New Registered Agent:		<u>.</u>	
New Registered Office Address:	Enter Florida street address		
	, Florida		
	Ciry	Zip Code	
New Designand Agent's Signature if shanging Designand Agent	<del>.</del>		

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 amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

<u> [itle</u>	Name	Address	Type of Action
	·		□ Add
		<u> </u>	□ Remove
MGR	Matella, Ann	3534 Mediterra Or	
		3534 Mediterra Or Clermont FL, 34711	<b>.≅</b> Remove
			□ Add
			Remove
			□ Add
			Remove
			Remove
			Nemove
			□ Add

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ective date, if other than the date of filing:  effective date must be specific, cannot be prior to date of receipt or filed date and cannot be me	(optional) ore than 90 days after
date this document is filed by the Florida Department of State)	
•	
ed 04/17/2015 ,	

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