# L500059586

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
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S. YOUNG

# **COVER LETTER**

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TO:	Registration Se Division of Con				
SUBJE	Rhymes	-Nacion Properties LLC			
SOBJE	C1	Name of Lin	nited Liability Company	·	
The enc	losed Articles of	Amendment and fee(s) are sul	omitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		Roger Rhymes			
		- · · · · · · · · · · · · · · · · · · ·	Name of Person		
		Rhymes-Nacion Properties LLC			
			Firm/Company		
		1825 Cutlass Cove	Dr		, A
		Address  Vero Beach, FL 32963`			) ;#\ '
	City/State and Zip Code			5 7 7 7	
		RhymesNacionProp			7 7 5
For furth	ner information c	concerning this matter, please of	(to be used for future annual report notifice all:	ation)	17 di 17 di
Rogei	Rhymes		561 400-3142		
	Name o	f Person	Area Code Daytime	Felephone Number	
Enclose	d is a check for t	he 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 Certificate of Certified Cop (additional copy	f Status & oy
	MAII	INC ADDRESS.	CTD CETYCOUNIE	D 4 DDDECC	

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

Rhymes-Nacion Properites LLC	
( <u>Name of the Limited Liability Company as it now a</u> (A Florida Limited Liability Comp	ppears on our records.) any)
The Articles of Organization for this Limited Liability Company were filed o	on 04/06/2015 and assigned
Florida document number 339983	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compar	ny here:
The new name must be distinguishable and end with 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)	7 70
	o rit
	7 7
Enter new mailing address, if applicable:	in the second se
(Mailing address MAY BE A POST OFFICE BOX)	=1 =
B. If amending the registered agent and/or registered office addres	ss on our records, enter the name of the ne
registered agent and/or the new registered office address here:	
Nice (CNL D. 14 14	
Name of New Registered Agent:	
New Registered Office Address:	
Ente	er Florida street address
With the state of	, Florida
City	7 in 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 amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Peter Nacion	3665 3rd Place	□ Add
		Vero Beach, FL 32968	■ Remove
		<del></del>	
<del></del>			□ Add
			□ Remove
			Âdd
			Remove-
			D Add
			Remove
			□ Add
			□ Remove
<del></del>			Add
			Remove

		<del></del>
(The effective	e date, if other than the date of filing:	<u></u>
Dated	04/13, 7015.	
	Signature of a member or authorized representative of a member  Cocycle  Typed or plinted name of signee	
	->,	1 7 7 7
		. on [

Page 3 of 3

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Filing Fee: \$25.00