

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
(Business Entity Name)				
(Document Number)				
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09/18/17--01004--022 **25.00

2017 SEP 18 PM 1: 51 ALLAHASSEE, FLORID-

K SALY SEP 1 9 2017

		(COVER LETTER	
	egistration Sec vision of Corp			
	Higgy Prope	rties LLC		
SUBJECT	:	Name of Lim	ited Liability Company	
The enclose	ed Articles of A	Amendment and fee(s) are sub-	mitted for tiling.	
		idence concerning this matter	-	
	in an correspon	and concerning the matter		
		Stuart Banks		
		·	Name of Person	
		Higgy Properties LLC		
			Firm/Company	<u></u>
		1591 Hayley Ln #101		
			Address	
		Fort Myers, FL 33907		
			City/State and Zip Code	
		sbanks8911@hotmail.com	to be used for future annual report notif	(antion)
For further	intermation of		-	nearony
		meerning this matter, please ca		
Stuart Ban			239 464 8331	
	Name of	Person	Area Code Daytime	e Telephone Number
Enclosed is	a check for the	e 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

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STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTI	CLES OF AMENDMENT		
i DULC	f TO f of operation	5-11 L	
ARTIC	CLES OF ORGANIZATION	2010	
	OF	CUTT SEP 10	
Higgy Properties LLC		2017 SEP 18 PH 1:51 ALLASIAN OF STATIONS	
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our record. Florida Limited Liability Company)	s) ASSECTORS	
The Articles of Organization for this Limited Liab	pility Company were filed on April 20, 2015	and assigned	
Florida document number L15000068758			
This amendment is submitted to amend the follow	ring:		
A. If amending name, <u>enter the new name of t</u>	he limited liability company here:		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC	" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO		<u> </u>	
(maning datagess may be a rost or rice be	201		
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records <u>readdress here</u> :	, <u>enter the name of the new</u>	
Name of New Registered Agent:		<u>_</u>	
New Registered Office Address:			
	Enter Florida street address		
		orida	
	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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager AMBR = Authorized Member

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Title	<u>Name</u>	Address	Type of Action
MGR	Jason Sachs	1591 Hayley Ln	🖶 Add
		Fort Myers, FL 33907	C Remove
			Change
			□ Add
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. D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

		2017 SEF 18 PM 1:51
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	May 1, 2017	
E. Effective date, if other than the date must he date mu	ate of filing:	(optional) g or more than 90 days after filing.) Pursuant to 605.0207 (3)(b
<u>Note:</u> If the date inserted in this bloc	k does not meet the applicable statutory	filing requirements, this date will not be listed as the
document's effective date on the Dep	artment of State's records.	
If the record specifies a delayed e (b) The 90th day after the recor	effective date, but not an effecti d is filed.	ve time, at 12:01 a.m. on the earlier of:
Dated September 14.	2017	
	· · · · · · · · · · · · · · · · · · ·	
1 Jun 1		

Signature of a member or authorized representative of a member

Stuart Banks

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Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00