1500091358

(Red	questor's Name)	
·	dress)	
	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer	
special instructions to r	-IIIIg Onicer.	

Office Use Only



900298969599

900298969599 05/17/17--01014--002 **25.00

17 WAY 17 PH 3: 10

O SIMMONS MAY 18 2017

COVER LETTER

TO:	Registration S Division of Co			
SUBJE	D&OPE	NECREST 2, LLC		
0000		Name of Limite	d Liability Company	
The enc	losed Articles o	of Amendment and fee(s) are submi	itted for filing.	
Please re	eturn all corresp	condence concerning this matter to	the following:	
		HEIDI PEREZ		
			Name of Person	
		CP MANAGERS, INC.		
			Firm/Company	
		6100 BLUE LAGOON DR.,	SUITE 430	
			Address	<u> </u>
		MIAMI, FL 33126		
			City/State and Zip Code	
		HPEREZCOLLAZO@OUTL		
		E-mail address: (to	be used for future annual report notifi	cation)
For furth	ner information	concerning this matter, please call	:	
HEIDI I	PEREZ		305 665-1250 at ()	
	Name	of Person	Area Code Daytime	Telephone Number
Enclose	l 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

D & O PINECREST 2, LLC		
(Name of the Limited Liabili (A Florid	ity Company as it now appears on our record a Limited Liability Company)	ds.)
he Articles of Organization for this Limited Liability (Company were filed on	and assigned
lorida document number L15000081358	<u></u> ·	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lim	ited liability company here:	
/A		
ne new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDI	RESS)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
nter new mailing address, if applicable:	N/A	
<u> Mailing address MAY BE A POST OFFICE BOX)</u>		

. If amending the registered agent and/or registered agent and/or the new registered office add		is, <u>enter the name of the ne</u>
Name of New Registered Agent: N/A		
New Registered Office Address:		
	Enter Florida street addre	· ss
		lorida
	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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	D&O DEVELOPMENT, INC.	6100 BLUE LAGOON DR., #430	
		MIAMI FL 33126	■ Remove
			Change
MGR	CP MANAGERS, INC.	6100 BLUE LAGOON DR., #430	■ Add
		MIAMI, FL 33126	Remove
			☐ Change
			
			□ Remove
			☐ Change
			□ Remove
			☐ Change
			Remove
			☐ Change
			Add
			Remove
			☐ Change

		*
- University of the second sec		
	A	
AND HOLD OF THE PROPERTY OF TH		
		
		: Just
		· -0
		5
effective date is listed, the date me e: If the date inserted in this b	e date of filing: ust be specific and cannot be prior to date of filing or plock does not meet the applicable statutory fil Department of State's records.	(optional) r more than 90 days after filing.) Pursuant to 605.0207 (3 ling requirements, this date will not be listed as the
record specifies a delayene 90th day after the re		e time, at 12:01 a.m. on the earlier of: $\frac{1}{2}$
MAY 11th	2017	
O.	35.	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00