## L15000169047

(R6	equestor's Name)	
(Ac	ddress)	
		· -
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	☐ MAIL
_	_	
(Bu	isiness Entity Nan	ne)
	ocument Number)	
(5)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Certified Copies	_ Certificates	of Status
		-
Special Instructions to	Filing Officer:	

Office Use Only



500340188665

02/10/20--61030--008 \*\*25.00

20 MAR 18 PH 1: 27

MAR 19 MO

## **COVER LETTER**

TO:

Registration Section

Division of Corpo	rations		
SUBJECT: ALLIST	EN PROPER	ZTY MAINTENA	INCE LLC
	Rect: Alusten Property Maintenance (CC)  Name of Limited Liability Company  Inclosed Articles of Amendment and fee(s) are submitted for filing.  Thomas Mausten jr.  Thomas Mausten jr.  Name of Person  Alusten jr.  Property Maintenance (CC)  Firm/Company  100 Junifer Trail  Address  Ocaus FL 34480  City/State and Zip Code  City/State and Zip Code  Alusten properties and Incompany  There information concerning this matter, please call:  Thomas Mainsten please call:  Thomas Mainsten please call:  Thomas Mainsten please call:  Thomas Mainsten please call:  Certificate of Natus Certified Copy (additional copy is enclosed)  Certificate of Natus & Certificate Copy (additional copy is enclosed)		
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
		<b>^ ^ ^ ^ ^ .</b>	
	1 HOMAS	M AUISTON	) K
	ALLISTON	PROPERTY MAIN	utenance LLC
		Firm/Company	
	401. 001	IPER TRAIL	
		Address	<del></del>
	Ocala	FL 34481	D
	E-mail address: (	to be used for future annual report noti	fication)
For further information con-			
	-		
THOMAS A	1 ALLISTON	at (352) 342-4	4166
Name of P	erson	Area Code Daytim	e Telephone Number
Enclosed is a check for the	following amount:		
▼ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Address:	.•	Street Address:	- <b>4</b> :
Registration Se Division of Cor		Registration Se Division of Cor	
P.O. Box 6327	porations	The Centre of T	Tallahassee
Tallahassee, FL	. 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears	on our records.)		_	
The Articles of Organization for this Limited Liability Company v  Florida document number	vere filed on	10/21/2016	an	d assigi	ned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabil  MIKE ALLISTON SNTER!  The new name must be distinguishable and contain the words "Limited Liability".			bbreviatio	on "L.L."	<u></u>
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)			1.:	20	
				20 Mail	<u>-</u>
		·	•	<u></u>	
Enter new mailing address, if applicable:		_			
(Mailing address MAY BE A POST OFFICE BOX)				3: 	_ن
			- <del>-</del> -	: 2	
			:	7	
B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:	Idress on our red	cords, <u>enter the nan</u>	ne of th	e new <u>r</u>	<u>egistered</u>
Name of New Registered Agent:	<del></del>				
New Registered Office Address:	Enter Floric	la street address			<del></del>
		Florida			
	City	, Florida	Zip (	Code	<del></del>
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr	performance of n	ny duties, and Lam	familia	r with e	and

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>	Address	Type of Action
			🗆 Add
			□Remove
			□Change
			□Remove
			□Change
			🗆 Add
			□Remove
			□ Remove □ □ Remove □ □ Change □ □ Change
			<del></del>
			Remove;
		: :	\rightarrow \rightarrow \text{Change}
			□Remove
			□ Change
			□Add
			□Remove
			□ Change

··				<del></del>		<del></del>
					·	
<del></del>	<del></del>				<del></del>	
	<del></del>					
<del> </del>				····		<del></del>
				•		
				···		
						20 HJR
					•	
						<del></del>
			<u> </u>	<del></del>	1 g	<del></del>
			<u> </u>			~~~~ ~~~~~
<del></del>				<del></del>		
ffective date, if other to an effective date is listed, the lotter occurrent's effective date	in this block does not	t meet the applica	to date of filing or able statutory fil	(o) more than 90 days a ing requirements.	ptional) after filing.) Pursua this date will no	nt to 605.020 t be listed a
record specifies a delayer	d effective date, but n	ot an effective til	me, at 12:01 a.m	i, on the earlier of	(b) The 90th (	lay after the
l is tiled.						
ated MARCH	hom M	a member or autho	ا ا	<b>^</b>		

Filing Fee: \$25.00