# U15000195098

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(Ad	ldress)	
(Ac	idress)	
(Cir	ty/State/Zip/Phone	e #)
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### **COVER LETTER**

	Registration Se Division of Co				
SUBJEC	416 Proper	ty, LLC.			
oc bjile		Name of Lim	ited Liability Company	ALL COMPANDES - 49-4-	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please ret	urn all correspo	ondence concerning this matter	to the following:		
		Marisol Palacios			
			Name of Person		
			Firm/Company	<del></del>	
		400 N.W. 74 AVE			
		MIAMI, FL 33126	Address		
		Marisolpalacios2009@hotn	City/State and Zip Code nail.com		
For furthe	er information c	E-mail address: (	to be used for future annual report notifi all:	2016 & E.C. A.C.L.	
Marisol I	Palacios		786 406-5799 at ()	AHASS + S	
		of Person		Telephone Number	
Enclosed	is a check for t	he following amount:		2	
\$25.0	0 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

## TO ARTICLES OF ORGANIZATION OF

416 Property, LLC. (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on and assigned L15000195098 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 400 N.W. 74 AVE, MIAMI, FL 33126 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 400 N.W. 74 AVE, MIAMI, FL 33126 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, eiter the name of the new registered agent and/or the new registered office address here: Marisol Palacios Name of New Registered Agent: 400 N.W. 74 AVE New Registered Office Address: Enter Florida street address MIAMI 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

### or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Marisol Palacios	400 N.W. 74 AVE, MIAMI, FL 331 <b>26</b>	<b>■</b> Add
			☐ Remove
			□ Change
AMBR	Habib Geagea	400 N.W. 74 AVE, MIAMI, FL 331 <b>7-6</b>	
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Effective date, if other than the o	date of filings	(optional)	
I an effective date is listed, the date must	be specific and cannot be prior to date of filing ck does not meet the applicable statutory	g or more than 90 days after filing.) Pursuant to 605 y filing requirements, this date will not be liste	5.020° ed as
ne record specifies a delayed The 90th day after the reco	effective date, but not an effect rd is filed.	ive time, at 12:01 a.m. on the earlie	er o
APRIL 4TH Dated	2016		
<b>44</b>	atains .		
	Signature of a member or authorized represen	itative of a member	

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Filing Fee: \$25.00