

# L15000 203 125

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

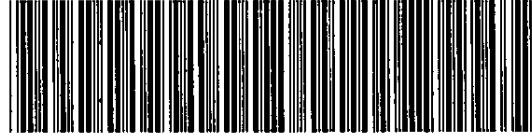
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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FILED  
16 MAY 23 PM 3:25  
SECRETARY OF STATE  
TALLAHASSEE, FL 32304

MAY 24 2016  
J. HARRIS

**DIEGUEZ & ASSOCIATES, LLC**

Telephone (305) 556-4106  
Facsimile (305) 362-3902  
anthony@dieguezassociates.com

Royal Oaks Professional Center  
7950 N.W. 155th Street, Suite 207  
Miami Lakes, Florida 33016

May 19, 2016

Registration Section  
Division of Corporation  
PO Box 6327  
Tallahassee, FL 32314

RE: Springtime Properties, LLC  
Florida Document Number: L15000203125

Dear Sirs,

Enclosed please find the Articles of Amendment to Articles of Organization along with our check in the amount of \$25.00.

Should you have any questions regarding this matter, please do not hesitate to contact our office,

Yours cordially,

ANTHONY DIEGUEZ, J.D.

AD/yc

Enclosure

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** SPRINGTIME PROPERTIES, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTHONY DIEGUEZ, J.D.

\_\_\_\_\_  
Name of Person

DIEGUEZ & ASSOCIATES, LLC.

\_\_\_\_\_  
Firm/Company

7950 NW 155 STREET, SUITE 207

\_\_\_\_\_  
Address

MIAMI LAKES, FL 33016

\_\_\_\_\_  
City/State and Zip Code

ANTHONY @DIEGUEZASSOCIATES.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTHONY DIEGUEZ

305 556-4106  
at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed 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**

SPRINGTIME PROPERTIES, 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 DECEMBER 4, 2015 and assigned  
Florida document number L15000203125.

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."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

7950 NW 155 STREET

SUITE 207

MIAMI LAKES, FL 33016

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7950 NW 155 STREET

SUITE 207

MIAMI LAKES, FL 33016

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: DIEGUEZ & ASSOCIATES, LLC.

New Registered Office Address: 7950 NW 155 STREET, SUITE 207

*Enter Florida street address*

MIAMI LAKES

*City*

Florida 33016

*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>	<u>Type of Action</u>
AMBR	GMK INVESTMENTS,CORP	240 CRANDON BLVD #247	<input type="checkbox"/> Add
		KEY BISCAYNE, FL 33149	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DIEGUEZ& ASSOCIATES, LLC	7950 NW 155 ST, STE. 207	<input checked="" type="checkbox"/> Add
		MIAMI LAKES, FL 33016	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 MAY 2008 PM 3:25

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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated MAY 18, 2016

Signature of a member or authorized representative of a member

*Anthony Dieguez*

Typed or printed name of signee

15 MAY 23 PM 3:25  
SECONDAIR DEF STATE  
FALLAPACIFIC FLORIDA