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To:

Division of Corporations

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: (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107

: (561)694-1639 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Pmail 1	Address:			
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CYNERGY PROPERTY MANAGEMENT, LLC

Certificate of Status	0
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APR 28 2016

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CYNERGY PROPERTY	MANAGEMENT, LLC		
(Name of the Limited Liability Comps (A Florida Limited	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on 02/17/2016	and assigned	
Florida document number L16000033167			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	bhreviation "L.L.E."	
Enter new principal offices address, if applicable:	8181 NW 154th Street, Suite 260	<del>**</del> **	
Principal office address MUST BE A STREET ADDRESS)	Miami Lakes, Florida 33016	27	
Enter new mailing address, if applicable:	8181 NW 154th Street, Suite 260	ي مِي	
Mailing address MAY BE A POST OFFICE BOX)	Miami Lakes, Fiorida 33016	ហ	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address here.		the name of the nev	
registered agent sind/of the new registered office address her	<u>e</u> :		
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	Florida		

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>	Address	Type of Action
MGR	Annette Blocker	8181 NW 154th Street, Suito 260	□ ∧dd
		Miami Lukes, Florida 33016	□ Remove
			■ Change
MGR	Sleeman Ales	8181 NW 154th Street, Suite 260	<b>=</b> Add
		Miami Lakes, Florida 33016	□ Removc ⊃ ⊘
			Changer
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-	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_	
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llan ef <u>Note:</u>	ive date, if other than the date of filing:	605.0207 (3)(1 isted as the	<b>)</b>
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear 90th day after the record is filed.	rlier of:	
Dated	April 27th , 2016		
	Signature of a member or authorized representative of a member		
	Anna Blocker, Manager by: Kristine Roy. Attorney-in-Fact		

Page 3 of 3

Filing Fee: \$25.00