## 416000065050

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## **COVER LETTER**

то:	Registration Section Division of Corporations	•	·
SUBJE	AZALEA PROPERTIES LLC		
SOBJE	Name of Lit	mited Liability Company	<del></del>
The enc	losed Articles of Amendment and fee(s) are su	bmitted for filing.	
Please re	eturn all correspondence concerning this matte	er to the following:	
	Nassom	C. Lewis Name of Person	
		Firm/Company	
	16057 Tan	per Palms Blvd	W #325
	Tampa, FL	336417 City/State and Zip Code	
	Newis 019 E-mail address:	@azaleaptoperties11 (to be used for future annual report notification)	<u>C.05</u> g
For furt	ner information concerning this matter, please		
	Name of Person	at ( <u>813</u> ) <u>298 – 95</u> Area Code Daytime Teleph	$\frac{100}{100}$ $\omega$ 1
Enclose	d is a check for the following amount:		10 AM 9:
□ \$25	.00 Filing Fee \$\Bigsim \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Eee,- i Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address: Registration Section	Street Address: Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



The Articles of Organization for this Limited Liability Company were filed on  $\frac{4/1/2016}{1}$ and assigned Florida document number \_\_\_\_\_L16000065050 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address CitvNew 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	NASSOMA LEWIS	16057 TAMPA PALMS BLVD W TAMPA, FL 3364	.7 _ ≣ Add
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	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
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Filing Fee: \$25.00