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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Mani Island Propulity, 11C
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kevin TALBOTT  Name of Person
Mani Island Properties, 11C
3200 Flague Aul.
Cey West, FT - 33040 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Vevin Talbott at (305) 294-0831 or 340-0634 (aux Area Code) Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status 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

Maritsland Propulies, 11C

(A)	Florida Limited Li	ability Company)	it out records.		
The Articles of Organization for this Limited Liab Florida document number		vere filed on	CIL B, ZOILE	and assigne	:d
This amendment is submitted to amend the follow	ing:			<b>16</b> OC	
A. If amending name, enter the new name of the				[ -7 or co	
The new name must be distinguishable and contain the word Enter new principal offices address, if applicab (Principal office address MUST BE A STREET.)	le:	y Company," the designment of	Flague A	areviation IL.C.	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>	3203 E _, Keyl	rayer A	UL 33040	
B. If amending the registered agent and/or registered agent and/or the new registered office			ur records, enter	the name of t	the new
Name of New Registered Agent:  New Registered Office Address:	Keuin 3207	ETT 3 Flags	LP AUL street address		
	Keyu	Jest City	, Florida	39040 Zip Code	<u>)                                    </u>

## 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.

f 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</u> <u>being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

Title : **Address** Type of Action Name 1 AMBR John W. Gorman Dery Sudenburg Alle ☐ Change □ Add ☐ Remove ☐ Change ☐ Add 16 CT PHAT: 27 PM □ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change

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If an eff Note:	ve date, if other than the date of filing:	iting.) Pursu	iant to 605. ot be liste	.0207 ed as
	ord specifies a delayed effective date, but not an effective time, at $12{:}01\ a.$ 90th day after the record is filed.	m. on th	ne earlie	er of
Dated <sub>.</sub>	October 4, 2016.			
	Signature of a member or authorized representative of a member			
	Kevin E. TALBOIJ			

Page 3 of 3

Filing Fee: \$25.00