16000088389

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UF	P WAIT	MAIL
•	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filing Officer:		

Office Use Only



200285792802

05/17/16--01009--021.**25.00

16 APR 17 PH 12: 1,6

MAY 1 8 2016 S. YOUNG

COVER LETTER

TO: Registration Division of	n Section Corporations				
cimiecy.	PHILADELPHIA RESIDE	ENTIAL PROPERTIES LLC			
SUBJECT:	Name of Lim	ited Liability Company			
	s of Amendment and fee(s) are sub espondence concerning this matter				
	Jorge Callejas				
		Name of Person	, , , , , , , , , , , , , , , , , , ,		
	PHILADELPHIA RESID	ENTIAL PROPERTIES LLC			
		Firm/Company			
211 NW 5th Ave					
		Address		ਲੱ	SEC ALL
	Boca Raton, FL 33432			APR	스케 프로
	blitzfl4@gmail.com	City/State and Zip Code		APR 17 PH 12: 46	
	E-mail address: (to be used for future annual report notif	ication)	<u>≅</u>	
For further informati	on concerning this matter, please c	all:		5	
Jorg	e Callejas	954 918-2488 at ()	.		
Na	me of Person	Area Code Daytime	Telephone Number		
Enclosed is a check	for the following amount:				
\$25.00 Filing Fe	e \$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 enclose		

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

PHILADELPHIA RESIDENTIAL F			
(Name of the Limite	d Liability Company as it now appe A Florida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liz Florida document number	ability Company were filed on _	May 4, 2016	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the	designation "LLC" or the at	obreviation "L.L.C."
Enter new principal offices address, if applica	ıble:		*****
(Principal office address MUST BE A STREET	TADDRESS)		20 CS
,			PR E
	· · · · · · · · · · · · · · · · · · ·		<u> </u>
			TO MC
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE I	<u> </u>		<u> </u>
			<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered of		on our records, <u>enter</u>	the name of the new
Name of New Registered Agent:	Jorge Callejas		
New Registered Office Address:	3100 NW 88th Avenue #209		
	Enter Fo	lorida street address	
	Sunrise	. Florida	33351
	City		Zip Code
New Registered Agent's Signature, if changing R	egistered 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, Agent, Agent of New Registered Agent

Page 1 of 3

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Jorge Callejas	3100 NW 88th Avenue #209	Add
		Sunrise, FL 33351	□ Remove
			☐ Change
AP	Margarita De La Cruz	2370 NW 17th Avenue, Apt 701	🗆 Add
		Miami, FL 33142	Remove LAILA
	·		Li Change
····	·····		Add
			Remove
			□ Change
			□ Add
			□ Remove
			Change
			Add
			Remove
	· .		Change
			Add
			□ Remove
			□ Change

1.5				
				
<u>, </u>	,			
_				
_				····
_				
_				
_				
		<u> </u>	<u> </u>	
_				
_				TALL SE
_				APR AFF
				SS C
				P
				PH.12: 46
_				
				
_				
Note: If	e date, if other than the date tive date is listed, the date must be of the date inserted in this block on the Department's effective date on the Department.	c does not meet the applicable s	(option e of filing or more than 90 days after fil statutory filing requirements, this d	al) ing.) Pursuant to 605.0207 (3)(b) ate will not be listed as the
	ord specifies a delayed e 90th day after the record		effective time, at 12:01 a.r	n. on the earlier of:
Dated _	May 12	2016	a - 1	
		مارک		
	Si	gnature of a member or authorized	representative of a member	
	Jorge Callejas	4		
		Typed or printed nam	ne of signee	

Page 3 of 3

Filing Fee: \$25.00