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COVER LETTER

		stration Sec sion of Corp			
SUBJEC		AGHAPY F	PROPERTIES LLC		
SUBJEC	.1.	,	Name of Lim	nited Liability Company	
The enclo	osed	Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please ret	turn :	all correspor	ndence concerning this matter	to the following:	
			Marian Youssef		
				Name of Person	
			AGHAPY PROPERTIES	LLC	
				Firm/Company	
			445 21ST COURT SW		
				Address	
			VERO BEACH ,FL 32962	2	
				City/State and Zip Code	
			markusf2005@yahoo.com		
			E-mail address: (to be used for future annual report noti	fication)
For furthe	er inf	ormation co	ncerning this matter, please ca	all:	
Mark You	ussei	f		772 713-1968	
		Name of	Person	at () Area Code Daytim	e Telephone Number
Enclosed i	is a c	theck for the	e following amount:		
\$25.00	0 Fil	ing 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

AGHAPY PROPERTIES LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records. Limited Liability Company))
he Articles of Organization for this Limited Liability C	ompany were filed on 06/14/2016	and assigned
Torida document number <u>L16000116619</u>	<u>_</u> .	
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limi	ited liability company here:	
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	(ESS)	
inter new mailing address, if applicable:		, ry
Mailing address MAY BE A POST OFFICE BOX)	····	
. If amending the registered agent and/or registered agent and/or the new registered office add		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	ida
	City	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>	Address	Type of Action
AMBR	MARK YOUSSEF	445 21ST COURT S.W	
		VERO DE ACH. EL 20072	■ Add
		VERO BEACH, FL 32962	□ Remove
			Change
			Remove
			Change
			□ Add
			Remove
			Change
			Remove
			Change
			123
			□ Remove
			□ Change
			
			Remove
			□ Change

		
		
Effective date, if other than the date of an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	e specific and cannot be prior to date of file k does not meet the applicable statuto	(optional) ling or more than 90 days after filing.) Pursuant to 605,0207 ory filing requirements, this date will not be listed as
e record specifies a delayed e The 90th day after the record	ffective date, but not an effective date.	ctive time, at 12:01 a.m. on the earlier of
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