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D. SCOTT OCT 2 6 2016

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

ASD PROPERTY MANAGEMENT LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

THOMAS RINGEL, ESQ.

Name of Person

MARKOWITZ, RINGEL, TRUSTY & HARTOG, P.A.

Firm/Company

9130 S. DADELAND BLVD., #1800

Address

MIAMI, FL 33156

City/State and Zip Code

ALANMANDELL@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

THOMAS	RINGEL	at (305) 67	' 0-5000	
	of Person	Area Code	Daytime Telephone Number	TALCALI SECRET
Enclosed is a check for	the following amount:			333 2 [
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60,00 Filing Certificate o Certified Co (additional copy	f Status &
		-		高田 33

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
Tellahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ASD PROPERTY MANAGEMENT, LLC

(Name of the Limited Liability Company as it now appears on our records,)
(A Plorida Limited Liability Company)

The Articles of Organization for this Limited L Florida document number L16000186970	iability Company were filed on	OCTOBER 7, 2016	and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the w	vords "Limited Liability Company," th	e designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	or registered office address	on our records, <u>enter t</u>	ne name of the new
	24 NORTHSHORE AV	ENUE	ACC DIT
New Registered Office Address:		Florida street address	80000000000000000000000000000000000000
	PALM COAST	, Florida <u>32</u> 1	37 3
	City		Zip Bode O
New Registered Agent's Signature, if changing]	Registered Agent:		Pri W
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regibeing filed to merely reflect a change in the company has been notified in writing of this	er and complete performance stered agent as provided for h registered office address, I he	of my duties, and I am far n Chapter 605, F.S. Or, if	miliar with and this document is ted liability

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the time, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	DAVID MANDELL	15900 WOODVALE ROAD	XX Add
		ENCINO, CA 91436	
			☐ Remove
			Change
AMBR	STEPHEN MANDELL	12000 SW 100 AVENUE	ĎAAŽ
		MIAMI, FL 33176	EFAdd
			Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			□ Remove
		·	Change
			□ Add
			TALLA SECONDA
			ASSET Change
			F STO AGO
			33
			☐ Remove
			☐ Change

amending any oth	er information, enter change(s) here: (Attach additional sheets, if neces	ssary.)	
	•		
			
<u></u>			
n effective date is listed, te: If the date inserte nument's effective date record specifies a	r than the date of filing: (option the date must be specific and cannot be prior to date of filing or more than 90 days after fixed in this block does not meet the applicable statutory filing requirements, this does not the Department of State's records. a delayed effective date, but not an effective time, at 12:01 a.m. or the record is filed.	iling.) Pursuant to 605, late will not be listed	d as the
10/	22/16.	_,	
10/	22/16. M. Mashl	SECTE TALLA	
ed	Signature of a singlifier or authorized representative of a member	COPIE CO	71
ed	22/16. M. Mashl	CHETARY O	丁

Filing Fee: \$25.00