Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 : (323)962-8600 Phone

: (323)962-3889 Pak Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **DEGLON PROPERTY, LLC**

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Electronic Filing Menu Corporate Filing Menu

Help

K. SALY

JUL 25 2017

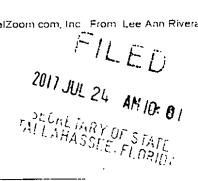
https://efile.sunbiz.org/scripts/efilcovr.exe

7/24/2017

COVER LETTER

TO:		trution Sec on of Corp				
			PROPERTY, LLC			
SUBJE	CT:		Name of Limi	ted Liability Company		
The enc	dosed A	Articles of A	amendment and fee(s) are sub-	nitted for filing.		
Please re	eturn a	II correspon	idence concerning this matter t	to the following:		
			Cheyenne Moseley			
				Name of Person		
			Legalzoom.com, Inc.			
				Firm Company		
101 N. Brand Blvd., 11th Floor						
				Address		
			Glendale, CA 91203			
			• · · · · · · · · · · · · · · · · · · ·	City/State and Zip Code		
٠			patrick@deglonconsult	ing.com to be used for future annual report not	dication)	
For furt	ther inf	ormation ec	oncerning this matter, please of		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
·			·	800 773-0888 at ()	ext. 9724	
Name of Person		Area Code Daytin	ne Telephone Number			
Enclose	ed is a	check for th	e following amount:			
□ \$25	5.00 Fil	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy as 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



DEGLON PROPERTY, LLC

(Name of the Limited Liability Company as if now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compa	any were filed on 10/13/2016	and assigned
Florida document number L16000189446		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited !	liability company here:	
Deglon Fallcrest Property, LLC		
The new name must be distinguishable and end with the words "Limited	Liability Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	ù	
	المحافظ المحاف	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on our records, <u>enter the</u> <u>here</u> :	name of the new
	₩.	
Name of New Registered Agent:		
New Registered Office Address:		and and the consequence on graphic districts from the sufferior
	Enter Florida street address	
	, Florida	Zm Code
		77
New Registered Agent's Signature, if changing Registered Agent and I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	agree to act in this capacity. I further agree olete performance of my duties, and I am fam as provided for in Chapter 605, F.S. Or, if t flice address, I hereby confirm that the limite	illiar with and his document is ed liability
Ĭŕ	Changing Registered Agent. Signature of New Regist	ered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the fitle, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member					
Title	Name	Address	Type of Action		
			O Add		
			DANGE AND		
		វាវៈ	- Aller		
		mpa ayana nagada may un makalimba sar aray kustan akkalimba a kusari en gira kusari sa sara kusari en gira (ekin sara en sar	☐ Remove		
			□ Remove		
			Add		
		والمراجع	□ Remove		
			☐ Remove		

D.	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
		B	
E.	Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this december is filed by the Florida Department of State)	2017 JUL	1.
	the date this document is filed by the Florida Department of State)	E	
	Dated June 30th . 2017	. 2	TT
	Delu-	。字 子	\
	Signature of a member or athorized representative of a member	ত 🙀	_
	Patrick Deglon, Member on behalf of DEGLON CONSULTING, LLC, Member		9 \>
	Typed or printed name of signee	ري.	

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Fiting Fee: \$25.00