LITOCCO22641

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(City/State/Zip/Phone #)
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FILED 2017 APR 24 PM 2: 54 SECRETARY OF STATE

K. SALY APR 25 2017

COVER LETTER

cup inc		Properties LLC			
SUBJEC	1:	Name of Limit	ed Liability Company		
The enclo	sed Articles of A	Amendment and fee(s) are subn	nitted for filing.		
Please ret	urn all correspoi	ndence concerning this matter to	o the following:		
		Jennifer Nifakos			
•	Division of Corporations Office Park Properties LLC Name of Limited Liability Company osed Articles of Amendment and fee(s) are submitted for filing. sturn all correspondence concerning this matter to the following: Jennifer Nifakos Name of Person Office Park Properties LLC Firm/Company 471 Sandpiper Drive Address Satellite Beach, FL 32937 City/State and Zip Code accounts@megatechnologiesinc.com E-mail address: (to be used for future annual report notification) ser information concerning this matter, please call: Nifakos Name of Person Area Code Daytime Telephone Number				
Division of Corporations SUBJECT: Office Park Properties LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following: Jennifer Nifakos Name of Person Office Park Properties LLC Firm/Company 471 Sandpiper Drive Address Satellite Beach, FL 32937 City/State and Zip Code accounts@megatechnologiesinc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jennifer Nifakos Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\begin{array}{c} \$25.00 \text{ Filing Fee} & \$30.00 \text{ Filing Fee} & \$55.00 \text{ Filing Fee} & \$60.00					
				Address	
			Satellite Beach, FL 32937		
					
		E-mail address: (to	be used for future annual report n	otification)	
For furthe	r information co	oncerning this matter, please cal	1:		
Jennifer N	lifakos		321 271-4025		
	Name of	Person	Area Code Dayt	ime Telephone Number	
Enclosed	is a check for th	e following amount:			
\$25.0	0 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	

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**

FILED
2017 APR 24 PM 2: 54
TAILAHASSEE, FLORIDA

Office Park Properties LLC

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

			7
The Articles of Organization for this Limited Liability	Company were filed on:	January 30, 2017	and assigned
Florida document number L17000022641			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company	here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the	e designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:			<u> </u>
(Principal office address MUST BE A STREET ADD	ORESS)		
			
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	 -		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		on our records, ent	er the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
Enter Florida street address			
<u></u>		, Florida	Zip Code
	City		Zip Code
New Registered Agent's Signature, if changing Register	ed 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, <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

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	Spiros Nifakos	471 Sandpiper Drive	. ■ Add
		Satellite Beach, FL 32937	□ Remove
			Change
			Add
			□ Remove
			Dy Dange
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			A Bomova
			
			☐ Remove
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4.	January 27, 2017
ı effe	ve date, if other than the date of filing: (optional) cetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
sume	ent's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
ted '	April 21, 2017
·····	
	() at
	-/-10 // /
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00