## 117000040291





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03/16/18--01006--008 \*\*25.00

18 MAR 16 PN 3: 09
SECRETARY OF STATE
TALL MIASSEE FLORIDA

K. SALY MAR 1 6 2018

## **COVER LETTER**

TO: Registration Se Division of Cor			
	roperty Management, LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del> </del>
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Belinda Henry		
		Name of Person	
		Firm/Company	
	5907 Watercolor Dr		
		Address	······································
	Lithia, FL 33547		
		City/State and Zip Code	
	Belinda@2henrysre.com		
	E-mail address: (	to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	all:	
Belinda Henry		813 995-7878 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing 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:

Ϋ́O:

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

18 MAR 16 PM 3: 09

TALLAMASSEE, FI ORIDA

2 HENRY'S PROPERTY MANAGEMENT, LLC

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Florida document number $\frac{L17000040291}{L17000040291}$	= =	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	imited liability company here:	
2 Henry's Management, LLC		
The new name must be distinguishable and contain the words "L	Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered agent and/or the new registered office according to the new registered a	gistered office address on our records, ento	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	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

or removed from our records: FILED 18 MAR 16 PM 3: OSType of Action

FALLAHASSEE, FLORIDA - Add MGR = Manager AMBR = Authorized Member Title <u>Name</u> **Address** ■ Remove ☐ Change □ Add □ Remove ☐ Change ☐ Remove \_□ Change ☐ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change \_□ Add ☐ Remove ☐ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

	The purpose of the Company is solely to				
-	manage other corporations, Limited Fiability				
	companies and any other entities Assigned to				
	the company.				
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	<u> </u>				
Effe	ctive date, if other than the date of filing: (optional)				
fan Not	effective 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 e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as				
	ment's effective date on the Department of State's records.				
	record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filed.				
Date	d March 13, 2018.				
	A + 1A = 3				
	Signature of a member or authorized representative of a member				
	Belinda Henry				
	Typed or printed name of signee				

Page 3 of 3

Filing Fee: \$25.00