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TALUAHASSEE, FLORIO,

MAY 1 9 2017 S. YOUNG

## **COVER LETTER**

	Registration Sec Division of Corp		<i>*</i>			
, SUBJEC		ROPERTY GROUP LLC	, "			
SOBJEC	, I	Name of Lim	ited Liability Company			
The encle	osed Articles of a	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspoi	ndence concerning this matter	to the following:			
		RAINIEL DE LA NUEZ				
			Name of Person			
		ACACIA PROPERTY GR	OUP			
			Firm/Company			
		1831 MAUREEN DRIVE		7 FEE		
			Address	THAY 18		
	DELTONA, FLORIDA 32738					
			City/State and Zip Code	ication)		
		E-mail address: (	to be used for future annual report notifi	ication)		
For furth	er information co	oncerning this matter, please ca	all:	· · · · · · · · · · · · · · · · · ·		
RAINIE	L DE LA NUEZ		732 5279633			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed	is a check for th	e following amount:				
<b>■</b> \$25.0	00 Filing Fee	□ S30.00 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)		
	MAHI	NC ADDRESS.	STREET/COURT	FD ADDRESS.		

Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ompany as it now appears on our records.) ited Liability Company)	
pany were filed on FEBRUARY 28, 2017	and assigned
liability company here:	
nability Company Incite.	
Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
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<u> </u>	<b>3 1 1 1 1 1 1 1 1 1 1</b>
	- W. D. F.
P.O. BOX 391487	8 SECTION OF THE SECT
DELTONA FL 32739	ين وي
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ed office address on our records, <u>enter</u> <u>here</u> :	r the name of the new
Cutan Elimida etmost adduma	····
,	Zip Code
	Liability company here:  Liability Company," the designation "LLC" or the second of th

## 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
MGR	NATASHA C DE LA NUEZ	1831 MAUREEN DRIVE	
		DELTONA, FL 32738	■ Remove
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an 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 605.020 ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a				not an eff	ective tim	e, at 12:01	a.m. on the ea	arlier of:
ffective date, if other than the date of filing:	MAY 13		2017	<b>→</b>		_		
an 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 605.020 ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a becoment's effective date on the Department of State's records.  The erecord 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.						`		

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Typed or printed name of signee

Filing Fee: \$25.00