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SECRETARY OF STATE
SECRETARY OF STATE

HAY 16 7017 HARRIS

COVER LETTER

SUBJECT:	Articles of Amendment and fee(s) are submitted Lability Company I Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following: Daniel Grand Regarded Properties		
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
		Name of Person	
	Name of Limited Lability Company ticles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following:		
	10/02	Sw 22 d St Address	<u>, </u>
	E-mail address: (t	City/State and Zip Code	I.com
For further information co)	
Name of	<u> </u>	at (+S+) 20+ - Area Code Daytime	3 子 S 3 Telephone Number
Enclosed is a check for the	e following amount:		
\$25.00 Filing Fee			

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

COMPOUND	PROPERTIES	CCC	
		our records.)	
The Articles of Organization for this Limited Liability Con Florida document number <u>70024074755</u>	mpany were filed on 3/3	24/12	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	d liability company here:		
The new name must be distinguishable and contain the words "Limited Enter new principal offices address, if applicable:	d Liability Company," the designa	ation "LLC" or the abbrevia	ation "L.L.C."
(Principal office address MUST BE A STREET ADDRE	<u>SS)</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register registered agent and/or the new registered office address		SECRETARY OF STATE	PH S: 3 nerme of the new
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida st	reet address	
	the Limited Liability Company as it now appears on our records. (A Florida Limited Liability Company) mited Liability Company were filed on 3/2 / / / / and assigned the following: the following: mame of the limited liability company here: and the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." f applicable: STREET ADDRESS) ble: FFICE BOX) The address on our records, enter the name of the ered office address here: ht:		
	City		p 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

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

$\mathbf{A}\mathbf{M}\mathbf{B}\mathbf{R} = \mathbf{A}$	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR.	Jonatha duite.	14310 Sw 175th to.	🗆 Add
		Migni R 33177.	□ Remove
		· ·	□ Change
MLK	Kevin Palmer.	10044 Su zend St.	C2 Add
		Miranar R 33025	□ Remove
			Change
Mar	Michael HARTY	16361 SW 114 Ct.	🗗 Ádd
	1	16361 SW 114 Ct. MAMI FR 33157.	□ Remove
			Change
MUL	Loxley Waugh	16321 SW 114 Ct.	□ Add
	,	MiAMI FL 33157	Remove
			Change
			🗆 Add
			Remove
			S PAG 3: 3
		2	Remove
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ective date, if other effective date is listed, the te: If the date inserted cument's effective date record specifies a	ne date must be specification this block does to the Department	ic and cannot be pri not meet the appl t of State's record	icable statutory fil ls.	more than 90 days afte ing requirements, th	is date will not be	e listed as
he 90th day after						
ed May	10 M		<u>. </u>			
/	$\langle \cdot \rangle$				SE	2011
	Signature	of a member or aut	horized representati	ve of a member		
			< 1			<u> </u>
	<u> </u>	Typed or prii	Junet	· ,	m	-
		Tr	dad man - P			
		Typed or prii	nted name of signee		FLO	5 L

Filing Fee: \$25.00