

L17000068132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

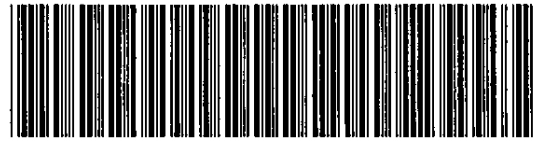
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MAY 16 2017  
J. HARRIS

## COVER LETTER

TO: Registration Section  
Division of Corporations'

SUBJECT: Compound Properties LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Damien Smart  
Name of Person

Compound Properties LLC  
Firm/Company

18102 SW 22<sup>nd</sup> St.  
Address

Miramar FL 33029  
City/State and Zip Code

omen.hybrid@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Damien Smart at (754) 204 - 3753  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

## COMPOUND PROPERTIES LLC

The Articles of Organization for this Limited Liability Company were filed on 3/24/17 and assigned Florida document number ~~900291074755~~ L17000008132

Page 1 of 3

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>	<u>Address</u>	<u>Type of Action</u>
MGR.	Jonathan Suite.	14310 SW 175 <sup>th</sup> Fe.	<input checked="" type="checkbox"/> Add
		Miami, FL 33177.	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Kevin Palmer.	10044 SW 2 <sup>nd</sup> St.	<input checked="" type="checkbox"/> Add
		Miramar, FL 33025	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Michael Hartley	16361 SW 114 Ct.	<input checked="" type="checkbox"/> Add
		Miami, FL 33157.	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Lorley Waugh	16361 SW 114 Ct.	<input checked="" type="checkbox"/> Add
		Miami, FL 33157	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If 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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated May 10<sup>th</sup>, 2017.

Signature of a member or authorized representative of a member

Typed or printed name of signee

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