## L17000074582

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
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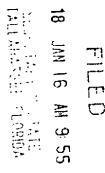


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## **COVER LETTER**

TO:	Registration Se Division of Cor			
er'n w		OUTH ASSOCIATES REAL	ESTATE LLC	
SUBJE	CT:		nited Liability Company	
The enc	losed Anicles of	Amendment and fee(s) are sub	omitted for filling.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Gordy Rogers		
			Name of Person	
		Speech South Associates I	LLC	
		<del> </del>	Firm/Company	
		44 Court Street, Suite 910		
			Address	
		Brooklyn, NY 11201		
			City/State and Zip Code	
		gordyrogers@gmail.com	to be used for future annual report notif	······
T C. w	sa e e e a care a care			canon
rorium	ner information cu	oncerning this matter, please c	ग्रा।:	
Gordy	Rogers		917 628-7525 at ( )	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclose	d is a check for th	e following amount:		
<b>■ \$</b> 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: 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

SPEECH SOUTH ASSOCIATES			
(Name of the Lim	ited Liability Comp: (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited I Florida document number 1.17000074582	Liability Company	were filed on	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name.	of the limited liab	oility company here:	
SPEECH SOUTH ASSOCIATES MANAGEME	NT LLC		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		44 Court Street, Suite 910	
(Principal office address MUST BE A STREET ADDRESS)		Brooklyn, NY 11201	7. 6
Enter new mailing address, if applicable:		44 Court Street, Suite 910	AN 16
(Mailing address MAY BE A POST OFFICE	BOX)	Brooklyn, NY 11201	₹ 0
	<del></del>		ب ج
B. If amending the registered agent and registered agent and/or the new registered of			ter the name of the new
Name of New Registered Agent:	Northwest Registered Agent, LLC		
New Registered Office Address:	3030 N. Rock	y Point Dr., Ste 150A	
,		Enter Florida street address	
	Tampa	Florida	33607
		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
Tom Glover / Manager

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>	Name	Address	Type of Action
MGR	Gordy Rogers	44 Court Street, Suite 910	Add
-		Brooklyn, NY 11201	□ Remove
			Change
MGR	Steven T Gold	421 Ponte Vedra Blvd	
		Ponte Vedra Beach, FL 32082	_ <b>⊟</b> Remove
			☐ Change
<del></del>			
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ective date, if other than the dat	te of filing:	(optional)	
n effective date is listed, the date must be :	specific and causes be prior to date of film does not meet the applicable statutory	2 or more than 90 days after filing ).	Pursuant to 605 0207 () (III not be listed as th
<u>ite:</u> If the date inserted in this block i			
ote: If the date inserted in this block is cument's effective date on the Depar	tment of State's records		
ste: If the date inserted in this block cument's effective date on the Depar	tment of State's records		
cument's effective date on the Depar		ive time, at 12:01 a.m. o	n the earlier of:
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D. If amending any other information, onter changes to be set 18 to 18 to 18 to 19 to 19 of well to me a

Page 3 of 3
Filing Fee: \$25.00