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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE		nue Apartments, LLC		
SUNJE	CT:		nited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	eturn all correspo	ondence concerning this matter	to the following:	
		Bryan Brezic		
			Name of Person	
		Palmetto Villas on 39th, L	LC	
			Firm/Company	
		11161 E SR 70, Suite 110	-11	
			Address	····
		Lakewood Ranch, FL 342	02	
			City/State and Zip Code	
		bryan77778@gmail.com	to be used for future annual report notil	•
For furt	her information o	oncerning this matter, please c	·	icanony
Bryan I	_		727 557-8727 at () Daytime	
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclose	d is a check for th	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:

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

53rd Avenue Apartments, LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on April 17, 2017	and assigned
Florida document number L17000085672		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
Palmetto Villas on 39th, LLC		
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		*
Enter new mailing address, if applicable:		
(Muiling address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	ce address on our records, enter th	e name of the new
registered agent antibol the new registered office address here:		\mathbb{Z}_{S}
Name of New Registered Agent:		.LA
New Registered Office Address:		N = 1
	Enter Florida street address	
<u>.</u>	Florida	
New Registered Agent's Signature, if changing Registered Agent:	City	Code ()
Accessioned Agent's Signature, Il changing Registered Agent:		س می

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 = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Fan effective date is lis Note: If the date ins	ther than the date sted, the date must be sp serted in this block do e date on the Departm	ecitic and cannot bes not meet the	ne applicable	ate of filing or mo statutory filing	re than 90 days a	ptional) fler filing.) Pursu this date will no	ant to 605 of be liste	5.0207 ed as
e record specific The 90th day a	es a delayed effe after the record is	ective date, s filed.	but not ar	n effective ti	me, at 12:0	1 a.m. on th	e earlie	er of
rated	128/17	·						
	Signa	ure of a membe	or authorized	i representative	of a member	· · · <u>-</u> · · · · · · · · · · · · · · · · · · ·		

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