47000113856

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J. HARRIS

COVER LETTER

TO:	Registration Se Division of Cor				
SUBJE	- · ·	Point Properties, LLC			
.,			ited Liability Company		
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:		
		Louslin Orange			
			Name of Person	<u>-</u>	
		Allegiance Point Propertie	s, LLC		
Firm/Company					
		9542 Wexford Chase Rd			
Jacksonville, FL 32257					
			City/State and Zip Code		
		Apointproperties@gmail.co	om		
		E-mail address: (to be used for future annual report notif	ication)	
For fur	ther information co	oncerning this matter, please ca	all:		
Louslin	n Orange		904 868-3911		
	None	f Person	at () Area Code Daytime	Talankan a Nissahar	
	Name of	i retson	Area Code Daynin	e Tetephone (vumber	
Enclose	ed is a check for th	ne following amount:			
■ \$2 :	5.00 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

05/23/2017	<u>dş.</u>)
The Articles of Organization for this Limited Liability Company were filed on L17000113856	and assigned
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	F-7
Principal office address MUST BE A STREET ADDRESS)	
	ĊI
Enter new mailing address, if applicable:	· - · · · · · · · · · · · · · · · · · ·
Mailing address MAY BE A POST OFFICE BOX)	
	C/I D)

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>	<u>Address</u>	Type of Action
MGR	Woly Augustine	9542 Wexford Chase RD, Jacksony, ILL, FL	. 32257 ■ Add
			□ Remove
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	(opt	ional)	
ective date, if other than the date of filing:	e than 90 days afte requirements, th	r filing.) Pursu is date will no	ant to 60: ot be list
ective date, if other than the date of filing:	•		
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