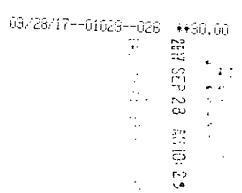
U17600 127140

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 1 ming Officer.





100301751851



J. HARRIS

COVER LETTER

SUBJECT:	•	oreyele Property. LLC		
SOBJECT.		Name of Limi	ted Liability Company	
The enclosed	Articles of a	Amendment and fee(s) are sub	nitted for tiling.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Kenneth L. Paretti, Esquire		
			Name of Person	
		Quinton & Paretti, P.A.		
			Firm/Company	
		1 SE 3rd Avenue, Suite 14	05	
			Address	
		Miami, Florida 33131		
			City/State and Zip Code	
		kparetti@quintonparetti.cor		
		E-mail address: ()	to be used for future annual report noti	fication)
For further in	nformation co	oncerning this matter, please ca	all:	
Kenneth L.	Paretti, Esqu	ire	305 358-2727 at ()	
	Name of	f Person	Area Code Daytim	e Telephone Number
Enclosed is a	a check for th	ne following amount:		
□ \$25.00 F	'iling Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tampa Motorcycle Property, LLC			• • •	
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on Jiability Company)	our records.)	
The Articles of Organization for this Limited L		were filed on June 11	2, 2017	_ and assigned
This amendment is submitted to amend the foll				
A. If amending name, enter the new name o	of the limited liab	ility company here:		
The new name must be distinguishable and contain the v	words "Limited Liabil	lity Company," the design	nation "LLC" or the abbre	viation "L.L.C."
<u>-</u>				
Enter new principal offices address, if applic				
(Principal office address MUST BE A STREE	<u>ET AUUKESS)</u>		<u>=</u>	~ · · · · · ·
			•	ಗು : ಅ :
Enter new mailing address, if applicable:				, a
Mailing address MAY BE A POST OFFICE	BOX)			
			· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and registered agent and/or the new registered o			r records, <u>enter th</u>	e name of the n
Name of New Registered Agent:	Kenneth L. Par	etti, Esquire		
Ni ni in in dollar Address	1 SE 3rd Avenu	ue, Suite 1405		
New Registered Office Address:		Enter Florida s	areet address	
	Miami		Florida _ ³³¹³	i
	-	City	1 10/10/4	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	~/		
I hereby accept the appointment as registery provisions of all statutes relative to the propaccept the obligations of my position as registeng filed to merely reflect a change in the company has been notified in writing of this	per and complete istered agent as p registered office	performance of my gravided for in Ghaj	dutiek, and Tamfan oter 605, F.S. Or, if	tiliar with and this document is

Page 1 of 3

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
AMBR	Aaron Sprague	8509 Gunn Highway, Odessa, FL 33556	
			Remove
			■ Change
	 		Add
			Remove
			Change
			Add
			□ Remove
			Change
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