# 117000131300

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### **COVER LETTER**

Division of Corporations
SUBJECT: Macuen Property Holdings, 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:
Weaven Property Holding, UC Firm/Contrary  P.O. Box 1265  Address  Lady Lake, Fe 32158-1265  City/State and Zip Code  Checker 220 Pahow. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at 350 at 205-3084  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Certificate of Status} \text{Certified Copy} \\ \text{(additional copy is enclosed)} (addi

#### MAILING ADDRESS:

TO:

**Registration Section** 

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

(Name of the Limited Liability Company as it low appears on our re (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number L17000131300 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

#### 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 = Aut	horized Member		
Title	<u>Name</u>	Address	Type of Action
MGR AMBR	Wonde A. Thon	Address 15975 SE 27th Ave Summerfield, FL34491	
		Summerfield, FL 34491	☐ Remove
Mar	Maria A. Cuevos Rosseio		Change
HMBR	Cuevas Rossia	15975 SE 27th Are Summerfuld, PC 34491	<b>_</b>
			Remove
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			Remove
			Change

D. If amen	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
<u>_</u>	All that how been requested to be changed	
_ <u>.</u>	on LLC is to change the filers from	
<u> </u>	President and Vice president for Wondy)	
	H. Then and Maria A. Cuevas Kosario	
_	respectively to be managers and	
_(	Que thought members. Title omor occurred	
<u>L</u>	when the organization was organally teled for.	
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(If an effe <u>Note:</u> I	we date, if other than the date of filing:	)(b
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.	
Dated _	Pune 26th 2017	
	Signature of a member or authorized representative of a member	
	Wondy Thon	
	Typed or printed name of signee	

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Filing Fee: \$25.00