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(Re	questor's Name)	<u> </u>
DA)	dress)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	,	
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	Certificates of	Status
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Special Instructions to	Filing Officer:	
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DIVISION OF CORPORATION
DIVISION OF CORPORATION
2017 JUN 27 PM 3: 21

N. CAUSSEAUX JUN 2 7 2017

COVER LETTER

то:	Registration Sec Division of Corp			
CHDI		PROPERTIES, LLC		
SUBJ	ECT:	Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		NICHOLAS L. BRUCE		
			Name of Person	
		COLLINS BROWN BAR	Name of Person RKETT GARAVAGLIA & LAWN Firm/Company D Address City/State and Zip Code COM (to be used for future annual report notification)	
			Firm/Company	
		Name of Person COLLINS BROWN BARKETT GARAVAGLIA & LAWN Firm/Company 756 BEACHLAND BLVD Address VERO BEACH, FL 32963 City/State and Zip Code NBRUCE@VEROLAW.COM E-mail address: (to be used for future annual report notification) r information concerning this matter, please call: AS L. BRUCE 772 231-4343 at ()		
		·	Address	
		VERO BEACH, FL 32963	3	
			City/State and Zip Code	
		="	Name of Person ARKETT GARAVAGLIA & LAWN Firm/Company VD Address 263 City/State and Zip Code COM s: (to be used for future annual report notification) e call: 172 231-4343 Area Code Daytime Telephone Number 1\$55.00 Filing Fee & \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy Certified Copy	
		E-mail address: (to be used for future annual report not	fication)
For fu	rther information co	oncerning this matter, please ca	all:	
NICH	IOLAS L. BRUCE		772 231-4343	
	Name of	Person	Area Code Daytin	ne Telephone Number
Enclos	sed is a check for th	e following amount:		
■ \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

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

BRANDA PROPERTIES, LLC			
(Name of the Limi	ted Liability Company as it now as (A Florida Limited Liability Compa	opears on our records.) any)	
The Articles of Organization for this Limited L Florida document number L17000132109	iability Company were filed or	n 06/16/2017 and assigned	
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of	f the limited liability compar	ıy here:	
BANDRA PROPERTIES, LLC		9.0	
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.L.	
Enter new principal offices address, if applic	cable:	7 Jun 97	1
(Principal office address MUST BE A STREI	ET ADDRESS)	2 0	20
	<u></u>		320
			200
Enter new mailing address, if applicable:		<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>	10
(Mailing address MAY BE A POST OFFICE	<i>BOX</i>)		
			_
B. If amending the registered agent and		s on our records, enter the name of the	nev
registered agent and/or the new registered o	ffice address here:		
Name of New Registered Agent:	NICHOLAS L. BRUCE		
	756 BEACHLAND BOULE	VARD	
New Registered Office Address:		r Florida street address	_
	VERO BEACH City	, Florida 32963 Zip Code	_
	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

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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			□ Change
			□ Add
			□ Remove
			☐ Change
			OIVISIO
		<u> </u>	SECRETARY CONSIGNOR CONTROL
			CORPOR ATION S
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			Remove
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ective date, if other than the effective date is listed, the date mute: If the date inserted in this bument's effective date on the I	ock does not me	eet the applica	to date of filing of the statutory f	or more than 90 d	_ (optional) ays after filing.) Pu nts, this date wil	rsuant to 605.02 I not be listed a
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record specifies a delaye he 90th day after the rec	d effective da ord is filed.	ate, but no	an effectiv	ve time, at 1	2:01 a.m. on	the earlier
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