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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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*2181 South Patrick LLC*

1344 S. Apollo Blvd., Suite 400

Melbourne, Florida 32901

phone: 321-723-4891 fax: 321-723-4857

MallakL@cfl.rr.com

November 8, 2017

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: L17000136225

Dear Sir or Madam:

Enclosed is an amendment changing the Authorized Member for 2181 South Patrick, LLC. We need this updated for a real estate closing that is scheduled for Tuesday, November 14, 2017. If you have any questions regarding this matter, please call me at the above telephone number.

Sincerely,



Bernard Lynn Mallak  
CFO, Registered Agent

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 2181 South Patrick, 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:

Lynn Mallak  
Name of Person

2181 South Patrick, LLC  
Firm/Company

1344 S. Apollo Blvd., Suite 400  
Address

Melbourne FL 32901  
City/State and Zip Code

MallakL@cfllc.com  
E-mail address. (to be used for future annual report notification)

For further information concerning this matter, please call:

Lynn Mallak at ( 321 ) 723-4891  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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

2181 South Patrick, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 6/22/2017 and assigned  
Florida document number L17000136225

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 the name of the new  
registered agent and/or the new registered office address here:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

Florida

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

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TALLAHASSEE, FLORIDA  
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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>	<u>Type of Action</u>
AMBR	Craig Deligdish	1344 S. Apollo Blvd	<input type="checkbox"/> Add
		Suite 303	<input checked="" type="checkbox"/> Remove
		Melbourne, FL 32901	<input type="checkbox"/> Change
AMBR	National Safe Harbor Exchanges	60 E. Rio Salado Parkway	<input checked="" type="checkbox"/> Add
		Suite 1103	<input type="checkbox"/> Remove
		Tempe, AZ 85281	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)


(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing ) Pursuant to 605 0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 11/9/2017

  
Signature of a member or authorized representative of a member

Lynn Mallak  
Typed or printed name of signee

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STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA  
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