L17000158167

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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August 12, 2019

ROBERT A LEE SR 660 SOUTHWEST 80TH ST OCALA, FL 34476

SUBJECT: LSX PROPERTIES LLC

Ref. Number: L17000158167

We have received your document for LSX PROPERTIES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 919A00016555

Catherine M Wood Regulatory Specialist II

RECEIVED 9AUS 23 ATHEA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LSX PROPERTIES LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000158167</u> .	and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	660 SOUTHWEST 80TH STREET		
(Principal office address MUST BE A STREET ADDRESS)	OCALA. FL 34476		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	660 SOUTHWEST 80TH STREET OCALA, FL 34476	FILL FLED	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	<u>rc</u> :	er the name of the ne	
Name of New Registered Agent: Lob New Registered Office Address: Lob	SW SOTY ST.		
	Enter Florida street address OMUH, Florida	34474	

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>	Address	Type of Action
MGMR	CHET FINKBEINER	3505 VETERANS HWY STE D	
		RONKONKOMA, NY 11779	
			Remove
		60 SOUTHWEST 80TH STREET	Change
MGMR	ROBERT A LEE SR	OCALA, FL 34476	⊟ Add
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Signature of a member or authorized representative of a member	·		-			
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed beament's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier. The 90th day after the record is filed. AUGUST 6TH 2019						
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a — Appliant of a member of authorized representative of a member						
BALLER ROBERT A. LEE SR. Typed or printed name of signee	Al /ST		_			

Page 3 of 3

Filing Fee: \$25.00