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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	1
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## **COVER LETTER**

Division of Co	rporations '		
	Tamarind Tree, LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Anaatrie D. Persaud		
		Name of Person	ala-katalah di sahah saha di sahah di di sahah di di sahah sahar
	Coconut Tree Properties, I	* Tamain	d Tree, Le
		Firm/Company	
	2181 Lake Marion Drive		
	<del></del>	Address	
	Apopka, FL 32712		
	- <del></del>	City/State and Zip Code	<del>,</del>
	coconultrecproperties@gm	anualrue	sers and lagahoo. con
	E-mail address: (	to be used for future annual report notif	ication)
For further information of	concerning this matter, please co	all:	
Anaatrie D. Persaud		917 520-6001	
Name	of Person	at ()at ()	Telephone Number
Enclosed is a check for t	he 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:** 

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 OF

Tamarind Tree, LLC		
(Name of the Limited Li (A F	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabili Florida document number	ity Company were filed on	and assigned
This amendment is submitted to amend the followin	g:	
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 ab	breviation "L.L.C."
Enter new principal offices address, if applicable	•	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	(1)	
(Manage many 33 MATT DD AX COX GITTON DOX	<u> </u>	
	registered office address on our records, enter	The name of the new
registered agent and/or the new registered office	address nere:	SEP 28
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	S TO
<u></u>	, 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

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 Address 83-60 118th 5t., #ZA Type of Action <u>Title</u> <u>Name</u> Shallene Persaud **AMBR** Kew Gdns, NY11415 ■ Add □ Remove ☐ Change □ Remove ☐ Change \_ 🗆 Add ☐ Remove ☐ Change □ Add ☐ Remove \_□ Change bbA □\_ □ Remove Change □ Add ☐ Remove

\_□ Change

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tive date, if other than the date of filing:	(optional)
ffective date is listed, the date must be specific and cannot be prior to date of filing of If the date inserted in this block does not meet the applicable statutory fi	
ment's effective date on the Department of State's records.	
ecord specifies a delayed effective date, but not an effective	e time, at 12:01 a.m. on the earl
e 90th day after the record is filed.	
Sorten les 25-	
Jestember 25, 2017.	_

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00