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COVER LETTER

TO:	Registration Sec Division of Corp				
CHDIC		ROPERTIES LLC			
SUBJE	СТ:	Name of Limited	d Liability Company	y	
		mendment and fee(s) are submi	-		
T leade I	otam an correspon	DONALD W MILLER ESQ			
		· · · · · · · · · · · · · · · · · · ·	Name of Person	n	
		DONALD W MILLER PA			
Firm/Comp				,	
P O BOX 30633					
			Address		
PALM BEACH GARDENS FL 33420					
			City/State and Zip G	Tode	·
		dwin @ dwmlawyer.com E-mail address: (to	₽ •		estion
For furt	her information co	ncerning this matter, please call	4	*-a	
DONALD W MILLER ESQ		561 at (366-7000	· (+ ·	
Name of Person		Area Code	Daytime	Telephone Number	
Enclose	d is a check for the	e following amount:			
\$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Certified Cor (additional copy	ру	☐ \$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

ASHYLA PROPERTIES LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company	were filed on 09-28-17	and assigned		
Florida document number L17000201072				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liah	ellity company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of			
Enter new principal offices address, if applicable:	3705 BELLVUE AVENUE	22		
Principal office address MUST BE A STREET ADDRESS)	LAKE WORTH, FL			
	33461	4		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered o		enter the name of the n		
registered agent and/or the new registered office address her	<u>e</u> :			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
·	, Flori			
	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 of removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	DONALD W MILLER	2701 PGA BLVD B	🗖 Add
		PALM BEACH GARDENS FL 33	■ Remove
			□ Change
MGR	BERNARD D EASTMAN	3705 BELLVUE AVENUE	= Add
		LAKE WORTH, FL 33461	□ Remove
			Change
<u></u>			Add
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ective date, if other the effective date is listed, the te: If the date inserted in ument's effective date o	date must be specific as n this block does not	nd cannot be prior to meet the applical	3-1-18 o date of filing or more ble statutory filing re	(optional than 90 days after filing quirements, this date	g.) Pursuant t	o 605.020 e list e d a
record specifies a d he 90th day ofter ti			an effective tim	e, at 12:01 a.m.	on the e	arlier o
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Filing Fee: \$25.00