117000209976

(Req	uestor's Name)	
(Add	ress)	
bbA)	ress)	
(City)	/State/Zip/Phone #	9)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Name)
(Doc	ument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to F	iling Officer:	

Office Use Only



700304848967

10/27/17--01015--017 **25.00

2011 OCT 27 ANTH: 55

K SALY OCT 3 0 2017

COVER LETTER

Division of Corp	orations			
Canal Poi	int Apartments LLC			
	Name of Limi	ted Liability Company		
The enclosed Articles of A	amendment and fee(s) are sub-	nitted for filing.		
Please return all correspon	dence concerning this matter t	to the following:		
	Karen Dean			
		Name of Person		
Firm/Company				
	3653 NW 5th Ter			
		Address		
	Boca Raton, Florida 33431			
		City/State and Zip Code		
	karen@rewealthadvisors.cor			
	E-mail address: (to	o be used for future annual report notif	ication)	
For further information con	ncerning this matter, please ca	II:		
Karen Dean		561 628-7950		
Name of	Person		Telephone Number	
Employed in a shoot for the	- Callania a marana			
Enclosed is a check for the				
\$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:

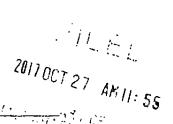
Registration Section

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**



Canal Point Apartments LLC

(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our reported Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liabilit Florida document number L17000209976	ty Company were filed on 10/10/2017	and assigned
This amendment is submitted to amend the following	p. 1.	
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 AL	ODRESS)	 _
Enter your mailing address if applicables		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office a		
New Registered Office Address:		
	Enter Florida street o	ddress
_	City	, Florida
New Registered Agent's Signature, if changing Regist		гр Соце
I hereby accept the appointment as registered ago provisions of all statutes relative to the proper an accept the obligations of my position as registered being filed to merely reflect a change in the registered company has been notified in writing of this chan	ent and agree to act in this capacity. Id complete performance of my dutie Id agent as provided for in Chapter (Itered office address, I hereby confir	s, and I am familiar with and 605, F.S. Or, if this document is

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
AMBR	Karen Dean	110 SE 6th Street	= Add
		Fort Lauderdale, FL 33301	□ Remove
			□ Change
			Add
			Remove Ghange 2
			□ Change 2 Add □ Remova
			☐ Remove ☐ Change
			
			☐ Remove
			□ Remove
			Change
			□ Add
			□ Remove
			□ Change

	·				
				· · · · · · · · · · · · · · · · · · ·	
		<u> </u>	 .		
					
					21100727
					1 (A)
					7.7
			 -		
					원수 연기
	· · · · · · · · · · · · · · · · · · ·				
					
					
ective date, if other than the effective date is listed, the date must	late of filing: be specific and cann	ot be prior to date	of filing or more t	(optio han 90 days after (nal) filing.) Pursuant to 605,020
e: If the date inserted in this blo ument's effective date on the De	ck does not meet t	he applicable s	tatutory filing red	quirements, this	date will not be listed a
unione's effective date on the 19e	attificity of State 8	s records.			
ecord specifies a delayed	effective date	hut not an	effective time	at 12·01 a	m on the earlier
ne 90th day after the reco	rd is filed.	oue not an	circuit cimi	., ut 12.01 u	in. on the carner
ed October 24	. 20	17			
	6				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00