· L17000217171

(Requestor's Name)	
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PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	





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COVER LETTER

Div	ision of Corp	orations		
SUBJECT:		las Partners, LLC		
		Name of Lim	ited Liability Company	
The enclosed	d Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		Tiffany Turk		
			Name of Person	
		ESO Equity Group, LLC		
			Firm/Company	
		150 Cocoa Isles Blvd #202		
			Address	
		Cocoa Beach FL 32931		
			City/State and Zip Code	
		tturk@esoequitygroup.com		===-
			to be used for future annual report notific	cation)
For further in	nformation co	ncerning this matter, please ca	all:	
Ori Tal			321 783-5252 at ()	
	Name of	Person		Telephone Number
Enclosed is a	a check for the	e following amount:		
■ \$25.00 F	filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TQ:

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**

Coconut Villas Partners LLC (Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our re	ecords.)		
The Articles of Organization for this Limited Liability Company were filed on 10-19-2017				
Florida document number L17000217171				
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 abbr	evi ati on "L	L.C."
Enter new principal offices address, if applicable:		- 0		
(Principal office address MUST BE A STREET ADDRESS)		A MA CONTRACTOR	\$ T	
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Enter new mailing address, if applicable:		\$ \(\frac{1}{2} \)		
(Mailing address MAY BE A POST OFFICE BOX)		,		•
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:		ords, <u>enter th</u>	e name	of the n
New Registered Office Address:				
New Registered Office Address.	Enter Florida street a	ddress		
		_, Florida		

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
AR	ESPLANADE PARTNERS, LTD	551 FIFTH AVE SUITE 3010	□ Add
		NEW YORK, NY 10176	■ Remove
			□ Change
MGR	ESO Equity Group, LLC	150 Cocoa Isles Blvd #202	Add
		Cocoa Beach FL 32931	Remove
			☐ Change
			<u>≅</u> S S Add
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Effective date, if other is an effective date is listed, Note: If the date inserted ocument's effective date.	the date must be speced in this block doe	cific and cannot be	prior to date of fo	ling or more than ory filing requir	(options 90 days after fili ements, this da	ng.) Pursu	ant to 60 ot be lis)5.0) sted
e record specifies The 90th day afte	a delayed effec r the record is	tive date, but filed.	t not an effe	ective time, a	t 12:01 a.m	n. on th	e earl	ier
Dated November 3		, 2017	·					
		(Q						

Page 3 of 3

Filing Fee: \$25.00