118000009823

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COVER LETTER

Divisio	on of Corpo	orations			
SUBJECT:	13140 SAI	BAL CHASE, LLC			
SUBJECT:		Name of Limit	ed Liability Company		
The enclosed A	rticles of A	mendment and fee(s) are subm	nitted for filing.		
Please return all	correspond	lence concerning this matter to	o the following:		
		THOMAS FRANKEL			
			Name of Person		_
		FRANKEL ENTERPRISES	;		
			Firm/Company		-
	3535 MILITARY TRAIL, SUITE 101				
			Address		_
		JUPITER, FL 33458			
			City/State and Zip Code		_
		ALLEN2693@AOL.COM			
		h-mail address: (to	be used for future annual r	eport notification)	
For further info	rmation cor	ncerning this matter, please cal	11:		
PAM ALLEN				-1033 EXT 2303	
	Name of I	Person	Area Code	Daytime Telephone Number	r
Enclosed is a ch	neck for the	following amount:			
\$25.00 Filir	ng Fee	☐ \$30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy tadditional copy is encl	Certificosed) Certificos	ite of Status &

 ${\bf MAILING~ADDRESS:}$

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 ${\bf STREET/COURIER\ ADDRESS:}$

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

13140 SABAL CHASE, LLC	
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) r Company)
The Articles of Organization for this Limited Liability Company were Florida document number L18000009823	filed on JANUARY 10, 2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	ompany here:
The new name must be distinguishable and contain the words "Limited Liability Con	npany. The designation "LLC" or the abbreviation "L.L.C.
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	三
Enter new mailing address, if applicable:	ISSEED PLED
Mailing address MAY BE A POST OFFICE BOX)	10 P
	10 S S
B. If amending the registered agent and/or registered office a registered agent and/or the new registered office address here:	address on our records, enter the name of the n
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

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>	<u>Address</u>	Type of Action
AMBR	THOMAS FRANKEL	3535 MILITARY TRAIL #101,	∏ Add
		JUIPTER, FL 33458	□ Remove
			☐ Change
AMBR	FRANKEL PROPERTY DEVELOPMENT, LLC	3535 MILITARY TRAIL, #101	
		JUPITER, FL 33458	■ Remove
			Change
			Add
			Remote 3 Change
			LEW DAMES OF A LAND A
			□ Remove
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			Change
			□ Add
			Remove
			☐ Change

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ective date n effective dat	e, if other than the date of te is listed, the date must be spec	f filing: ific and cannot be prior to	date of filing or more than	(optional) n 90 days after filing.) Purs	uant to 605.02
	ate inserted in this block doe fective date on the Departme		ole statutory filing requ	rements, this date will r	not be listed
	pecifies a delayed effect day after the record is		an effective time,	at 12:01 a.m. on t	he earlier
ted	MARCH 12	2018			
-		7 7 =			
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Typed or printed name of signee

Filing Fee: \$25.00