# 118000150992

(Re	questor's Name)	
(Ad	ldress)	·
·		
74.1	Ida - a	<del></del> .
(AO	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ru	isiness Entity Nar	me)
(50	isiness Entity (var	110)
(Do	ocument Number)	1
Certified Copies	_ Certificates	s of Status
	<del></del>	
Special Instructions to	Filing Officer:	

Office Use Only



400319221524

10/16/18--01036--019 \*\*30.0

Charle park

SECRETATION SERVER FOR A SERVER SERVE

#### **COVER LETTER**

Divi	sion of Cor	porations			
		PERTY HOLDINGS LLC			
SOBJECT.		Name of Lin	nited Liability Company		
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	all correspo	ondence concerning this matter	to the following:		
		SALVATORE CINIGLIO			
			Name of Person		
		3959 PROPERTY HOLD	INGS LLC		
			Firm/Company		
		3755 NW 78TH AVE			
Address					
MIAMI, FL 33166					
		srciniglio@gmail.com	City/State and Zip Code	<u>-</u>	
		E-mail address: (	to be used for future annual	report notificat	tion)
For further in	formation c	oncerning this matter, please c	all:		
SALVATOR	E CINIGLI	0	954 51 at ( )	2-0340	
	Name o	f Person		Daytime Te	dephone Number
Enclosed is a	check for th	ne following amount:			
□ \$25.00 Fi	ling Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is end		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr	ING ADDRESS: ation Section n of Corporations	Registrat	I'/COURIER tion Section of Corporation	

P.O. Box 6327

Tallahassee, FL 32314

ťo:

Registration Section

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

### TO ARTICLES OF ORGANIZATION **OF**

FILED

3959 PROPERTY HOLDINGS LLC

company has been notified in writing of this change.

2018 OCT 15 AM 10: 36

3939 PROPERTY HOLDINGS LLC			- 00
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on	our records:) : Y () = (	TATE
(A Florida Elimited )	Liantiffy Company)	TALILAHASSEE	FL
The Articles of Organization for this Limited Liability Company	were filed on $\frac{06/197}{2}$		
Florida document number L18000150992			
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 design	nation "LLC" or the abbrev	iation "L.L."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:  (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	ffice address on ou	ır records, <u>enter the</u>	
Name of New Registered Agent:			
New Registered Office Address:			
New Negistered Office Address.	Enter Florida s	street address	
	City	. Florida	lip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete			

If Changing Registered Agent, Signature of New Registered Agent

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this documer being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

#### or removed from our records:

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of
MGR	ANTONIO PECORELLI	1627 SW, 37th Ave, Unit 200, Miami FL, 33145	
			Add
			☐ Remi
MGR	FILOMENA PECORELLI	1627 SW, 37th Ave, Unit 200, Miami FL, 33145	
			□ Remo
			Add
			□ Remov
			□ Change
			□ Add
			Remove
			Change
			☐ Remove
			Change
<del></del>			
			Remove
		<del></del>	

	·
``	
	10/01/2010
E. Effect	tive date, if other than the date of filing: 10/01/2018 (optional) Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste-
docur	nent's effective date on the Department of State's records.
If the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie
(b) The	e 90th day after the record is filed.
Dated	OCTOBER 01 2018
Dated	
	Circighio Lelverry
	Signature of a member or authorized representative of a member
	SALMATORE CINICUIO
	SALVATORE CINIGLIO

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00