L18000160627

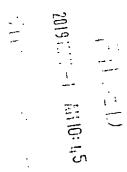
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

	istration Se ision of Cor			
SUBJECT:	ICDA Prop	erty Maintenance & Manago	ement, LLC	
object.		Name of Lim	ited Liability Company	
The enclosed	d Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Larry Harrold		
		ICDA Property Maintenanc	Name of Person e & Management, LLC	
		5454 Brightwater Ln	Firm/Company	
		Jacksonville, FL 32277	Address	
		icdamanagement@gmail.co	City/State and Zip Code m	
		E-mail address: (to be used for future annual report not	ification)
For further in	iformation co	oncerning this matter, please co	ıll:	
Larry Harro			904 6162577 at ()	
	Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is a	check for th	e following amount:		
≡ \$25.00 F	iling 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:

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

ICDA Property Maintenance & Management, LLC

(Name of the Limited Liability Compar (A Florida Limited L	iy as it now appears on our r lability Company)	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number L18000160627	were filed on 07/02/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
ICDA Properties, LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation	"LLC" or the abbreviation "L.L.C."
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)		٠,٠
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent:		cords, enter the name of the new
New Registered Office Address:	Enter Florida street a	ddrace
	City	_, Florida
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 paccept the obligations of my position as registered agent as paceing filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my dutie rovided for in Chapter (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:

Title	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
		<u>-</u>	Change
			□ Remove
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			Remove
			Change
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II an effect <u>Note:</u> If	e date, if other ive date is listed, the date inserte t's effective dat	the date must be d in this block	specific and does not me	cannot be prior eet the applic	to date of filing able statutory	or more than 9	optional) Odays after filing ments, this date) ;.) Pursuant to 605,0207 will not be listed as
ne recor The 90	rd specifies a Oth day afte	delayed ef	fective da is filed.	ate, but no	t an effecti	ve time, at	12:01 a.m.	on the earlier of
Dated	A-Pa	ء کل ج	JS	301	r'			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00