L18000166092

(Requestor's Name)
(Address)
(100.000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
•
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special manuculars to 1 ming Officer.

Office Use Only



800316052668

07/26/18--01015--010 **25.00

18 JUL 26 PM 2: 07

N COOPER JUL 31 2018

COVER LETTER

Division vi Corporations						
SUBJECT: Edo Property Improvements LLC Name of Limited Liability Company						
The enclosed Articles of Amendment and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Deciree Nacer Name of Person Fdo Property Improvements, UC						
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Desire Naca Name of Person						
6720 West 11th cases						
Hialeah FL 33012 City/State and Zip Code dezy21@ Rucketmail. con						
Desiete Nacee al (786) 539.6440						
Name of Person Area Code Daytime Telephone Number						
Enclosed is a check for the following amount:						
Certificate of Status Certified Copy Certificate of State (additional copy is enclosed) Certified Copy	□ \$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

	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 8000 609 2</u>	
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	ity Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	89 SSE
	9 3.87 E
Enter new mailing address, if applicable:	-
(Mailing address MAY BE A POST OFFICE BOX)	2: A
	17 ON:
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, enter the name of the ne
Name of New Registered Agent:	
New Registered Office Address:	
New Registered Office Address.	Enter Florida street address
·	Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
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 accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	City Zip Code ee to act in this capacity. I further agree to comply with performance of my duties, and I am familiar with and provided for in Chapter 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>	Name	Address	Type of Action
AMBR	PAGO ECO	6720 wt 11th court Hiale	MIZAdd
		FL 33012	Remove
			Change
			Add
			□ Remove
			Change
			Add
			Remove
		- <u>-</u> .	Change
	- 		Add
			□ Remove
			Change
			🗆 Add
			Remove
			Change
			🗆 Add
			□ Remove
			Change

-	·	- -	-
_		<u> </u>	-
_			_
_			_
_			_
_			_
_		هيو	SEIAIO 13S
_		8 JUL	SECR
_		<u> </u>	- PETAR
_		3	Y OF S
_		2 07	_ ➤
_		97	- 110HS
_			_
_			-
-			-
_			-
in effe ote:	we date, if other than the date of filing:		
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t 90th day after the record is filed.	he earli	ier of
ted _	July 15 298		
	Signature of a member or authorized representative of a member		
	Significate of a product of a distribution of a mention		

Page 3 of 3

Filing Fee: \$25.00