## L18000188321

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DIVISION OF CORPORATION

N. COOPER SEP 1.8 2018

## **COVER LETTER**

SUBJECT: Derv	Processed Articles of Amendment and fee(s) are submitted for filing.  Teturn all correspondence concerning this matter to the following:  Condy Devect.  Name of Person  Firm/Company  3411 W Swann Ave  Address  Tampa FL 33609  City/State and Zip Code  Committee and Intervention of the committee and Intervention of the city Code  City/State and Zip Code  Committee and Zip Code  City/State and Zip Code  Committee and Zip Code  City/State and Zip		
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
		dy Derve h	
	****	Firm/Company	<del></del>
	3411 1	N Swann Ave	
	Tam	Oa / FL 3360 City/State and Zip Code	09
	Cindy d (a E-mai) address: (a	breezin. Com to be used for future annual report notifi	cation)
For further information cor	ncerning this matter, please ca	ill:	
Kimberly De	26ance Person	at ( <u>813</u> ) <u>785-2</u> Area Code Daytime	3736 Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee		Certified Copy	Certificate of Status &

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

Dervech Realty Co	Management LL unpany as Mow appears on our reco	- C ords.)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L 1180001883</u> 2	pany were filed on 8/6	18 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited L	.iability Company," the designation "L	.I.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	<u> </u>
		SECRE LA
Enter new mailing address, if applicable:		- 18.1
(Mailing address MAY BE A POST OFFICE BOX)	Enter Florida street address  Enter Florida street address  City  Zip Code  Zip Code	
	<del></del>	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	lress
	·	
	•	Zip Code
New Registered Agent's Signature, if changing Registered Age		
provisions of all statutes relative to the proper and compl	lete performance of my duties, as provided for in Chapter 60.	and I am familiar with and 5, 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 = A	uthorized Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
Mar	Cinday A Dervech	3711 W Swam Are	Add
			Remove
		·	☐ Change
Mgr_	Cindy A Dervech	3711 W Swann Ave	Add
	'		□ Remove
		·	Change
			☐ Remove
		<del></del>	Change
•			
			□ Remove
			Change
		· · · · · · · · · · · · · · · · · · ·	
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Effective date, if other than (If an effective date is listed, the date. Note: If the date inserted in t document's effective date on	te must be specific a his block does no	and cannot be prior t meet the appl	icable statutory	g or more than 90 filing requiren	(optional) days after filing.) nents, this date v	Pursuant to 605 will not be liste	.0207 (1 ed as th
the record specifies a del ) The 90th day after the			ot an effect	ive time, at	12:01 a.m. d	on the earlie	er of:
Dated Sept 11	7	. <u>2018</u>	·				
	Signature of	a member or aut	horized represen	tative of a memb	er		
	indy D	eryech_	nted name of sign				

Page 3 of 3

Filing Fee: \$25.00