## Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Pax Number : (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

<b>Email</b>	Address	l	 		

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 24 PROPERTY MANAGEMENT LLC

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Corporate Filing Menu

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	ERTY MANAGEMENT L		
(Name of the Limited Lia (A Flo	bility Company as it now appears rida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Florida document number <u>L18000211310</u>	y Company were filed on	09/05/2018	and assigned
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the li	imited liability company her	<u>'e</u> :	
The new name must be distinguishable and contain the words "I	Limited Liability Company," the des	signation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)	· · · · · · · · · · · · · · · · · · ·	<u>_</u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or re registered agent and/or the new registered office a		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			<del></del>
New Registered Office Address:			
	Enter Florie	da street uddress	
	···	, Florida	
	City		Zip Cocte

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>	Address	Type of Action
MGR	CC123 Holdings LLC	11876 Wiles Road	<b>⊠</b> ∧dd
		Coral Springs, FL 33321	☐ Remove
			☐ Change
MGR	CC123 LLC	11876 Wiles Road	
		Coral Springs, FL 33321	<b>⊠</b> Remove
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Effective d	ate, if other than date is listed, the dat	the date of	filing:	at ha prior to d	late of filing or r	none than 90 dec	(optional)	) Pursuant to 605	. 0207 C
Note: If the	date inserted in the effective date on the	his block doc	s not meet 1	he applicable	statutory filir	is rednicemen	is, this dute	will not be list	ad as th
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	specifies a del			but not a	n effective	time, at 12	:01 a.m.	on the earlie	er of:
The 90th	n day after the	record is	filed.						
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Dated	September 10	<u></u>	<u> </u>	2018	$\Delta$				
_				21005					
_		Signatu	re of a memb	er or authoriz	ed representativ	e of a member			

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