118000 257 499

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

Office Use Only



000330382900

06/10/19--01022--012 **25.00

FILED

19 JUNIO AN 8:21

SECREMENT OF SIGNA
FALL ANASSET TURBUA

JUN 2 4 2019 T SCHROSDER

COVER LETTER

PROPERTIES BY ARIEL LLC SUBJECT: 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: ARIEL ROMAN Name of Person ARIEL PROPERTIES LLC Firm/Company 917 VERONA ST Address KISSIMMEE FL 34741 City/State and Zip Code INFO@NADIESABEMAS.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SAMUEL PEREZ Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

PROPERTIES BY ARIEL LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our reco (Liability Company)	ords.)
The Articles of Organization for this Limited Liability Companional document number $\frac{L18000257499}{L18000257499}$	y were filed on 11/01/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		19 ALL
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered or registered agent and/or the new registered office address he Name of New Registered Agent:		
New Registered Office Address:		
- 4 175 Quinal (20 10 . 1 . 10	Enter Florida street add	ress
<u>, </u>		Florida Zip Code

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
AMBR	HECTOR LOPEZ		
		114 E 102 ST APT 4-A	D Add
		NEW YORK, NY. 10029 US	■ Remove
			Change
			Add
			Remove
			Change
			<u> </u>
			Remove
			C D Change
		-	
		<u> </u>	□ Remove
		<u></u>	Change
			Add
			☐ Remove
			☐ Change
			☐ Remove
			Change

			.					
	<u> </u>							
							_	
	<u> </u>							
	 							
						75.00	_	
						75	_ 	_
		_ 	 -			<u> 完育</u>	\ <u>\</u>	<u></u>
						1555 1555 1555 1555 1555 1555 1555 155	0	
						T.C.	7** 31.	<u> </u>
					-	- 22 - 22 - 22 - 22	<u></u>	<u></u>
						- <u>S</u> F	<u> </u>	
					•	<u>. </u>		
Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this bedocument's effective date on the I	ist be specific and lock does not m	cannot be prior t eet the applica				ling.) Pur		
ne record specifies a delaye The 90th day after the rec		ate, but not	an effectiv	ve time, at	12:01 a.	m. on	the ea	arlier of
Dated	,	2019	_ ·					
Ovel	Signature of a r	<u>~</u>			- <u></u> .			_

Page 3 of 3

Filing Fee: \$25.00