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(Requ	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Registration Se Division of Cor			
Prop Guys.	LLC		
306/501.	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subt	nitted for filing.	
	indence concerning this matter		
	Aaron Green		
		Name of Person	
	Prop Guys, LLC		
		Firm/Company	
	9352 Westover Club Circle	<u> </u>	
	Windermere, Fl. 34786	Address	
		City/State and Zip Code	
	premierpropsp2@gmail.com	n to be used for future annual repo	
For further information of	oncerning this matter, please co		A CONTRACTOR OF THE PARTY OF TH
Aaron Green		407 963-13	
Name o	f Person	Area Code [Daytime Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Certificate of Status Certified Copy (additional copy is enclose
Mail	ING ADDRESS:	STREET/C	OURIER ADDRESS:

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Prop Guys, LLC	
(Name of the Limited Liability Company as it now appears on our re (A Florida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{11/13/2018}{\text{Elorida document number}}$	and assigned
This amendment is submitted to amend the following:	Ç
A. If amending name, enter the new name of the limited liability company here:	
Premier Props, LLC	-
The new name must be distinguishable and contain the words "Limited Liability 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:	5
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	5
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our recommendations.	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our recommendations.	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our recregistered agent and/or the new registered office address here:	ords, enter the name of the
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our recregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	ords, <u>enter the name of the</u>

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
AMBR	Corinella, Michael	422 San Sebation Prado	
		Amlamonte, Fl. 32714	
			■ Remove
			☐ Change
AMBR	Green, George	9352 Westover Club Circle	
		Windermere, Fl. 34786	■ Add
		Wilderfiele, Pr. 194760	□ Remove
			☐ Change
			Add
			☐ Remove
		 	Change
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			□ Remove
			Character Character
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			Remove
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f an ei <mark>Note:</mark>	ctive date, if other than the date of filing: If entire date is listed, the date must be specific and cannot be prior to date of filing or more than 90 d If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	_ (optional) lays after filing.; ents, this date) Pursuant to 605.0207 (3) will not be listed as the
	ecord specifies a delayed effective date, but not an effective time, at 1 $$ e 90th day after the record is filed.	2:01 a.m.	on the earlier of:

Page 3 of 3

Filing Fee: \$25.00