L19000003335

	_
(Requestor's Name)	
(Address)	-
(Address)	_
(Madiess)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Dallana Faith Mana)	_
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	
	-
	_
Special Instructions to Filing Officer:	
	۱
	l
	١
	J

Office Use Only



900404174549

03/21/23--01001--014 **25.00

2673 51.2 21 AM 10: 32

ATT ANA 351 E. F. . .

RECEIVED
2023 HAR 21 AM II: 13

CORPORATE ACCESS, _____

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

P	PICK UP:	MISTY 3/21			
CERTIFIED COPY	,				
РНОТОСОРУ		-			
CUS	 				
FILING	LLC	CAMEND			
YPROP (FL) LLO PORATE NAME AND D	C OCUMENT #)				
PORATE NAME AND D				_	
PORATE NAME AND D	OCUMENT #)				
PORATE NAME AND DO	OCUMENT #)		<u></u>		
PORATE NAME AND DO	OCUMENT #)	.			
PORATE NAME AND DO	OCUMENT #)				
	ATE NAME AND DO	ATE NAME AND DOCUMENT #) ATE NAME AND DOCUMENT #)	ATE NAME AND DOCUMENT #)	ATE NAME AND DOCUMENT #)	ATE NAME AND DOCUMENT #)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MED

2023 MR 21 AM 10: 32

PayProp (FL) LLC

(Name of the Limited Liability Company as it now appears on our records.)

the Articles of Organization for this Limited Liability Company were filed on	(A	Florida Limited Liability Compa	iny)	13 MIN OF STATE
his amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS; Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX; If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered defice address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida street address City Zip Code To Code the Agent's Signature, if changing Registered Agent: New Provided Street the appointment as registered agent and agree to act in this capacity. I further agree to comply with the avoisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and scept the obligations of my position as registered agent as provided for in Chapter 603, F.S. Or, if this document is		ility Company were filed or		2271 6
If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Addiling address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered diffice address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	Florida document number L19000003335	·		
nter new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent: New Registered Agent:	This amendment is submitted to amend the followi	ing:		
nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Pailing address MAY BE A POST OFFICE BOX; If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	A. If amending name, enter the new name of th	ne limited liability compan	<u>y here</u> :	
Inter new mailing address, if applicable: **Mailing address MAY BE A POST OFFICE BOX** If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent:	The new name must be distinguishable and contain the word	ls "Limited Liability Company,"	the designation "LLC" or the a	bbreviation "L.L.C."
If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent:	Enter new principal offices address, if applicabl	le:	<u> </u>	
If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	(Principal office address MUST BE A STREET A	ADDRESS)	···	
Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent:			, <u> </u>	
Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent:				
Name of New Registered Agent: New Registered Office Address: Enter Florida street address City Zip Code ew Registered Agent: thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the covisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and except the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is	Enter new mailing address, if applicable:		· ····	
Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City Zip Code we Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and except the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is	(Mailing address MAY BE A POST OFFICE BO	<u> </u>		· · · · · · · · ·
Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City Zip Code we Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and except the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is				
Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City Zip Code we Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and except the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is	R If amending the registered agent and/or regis	stared office address on o	ur regards antor the name	no of the many mediators
New Registered Office Address: Enter Florida street address	agent and/or the new registered office address h	iere:	ar records, enter the har	ne of the new registered
New Registered Office Address: Enter Florida street address				
Enter Florida street address Florida City City Zip Code we Registered Agent's Signature, if changing Registered Agent: thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the covisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and except the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is	Name of New Registered Agent:			
Enter Florida street address Florida City City Zip Code we Registered Agent's Signature, if changing Registered Agent: thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the covisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and except the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is	New Registered Office Address:			
City Zip Code www.Registered Agent's Signature, if changing Registered Agent: thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and recept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is		Enter		
thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the povisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and recept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is	_		Florida	
hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the vovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and recept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is		•		Zip Code
ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is	· · · · · · · · · · · · · · · · · · ·			
ring filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability Impany has been notified in writing of this change.	provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the regi	and complete performanc red agent as provided for istered office address. I h	e of my duties, and I am in Chapter 605, F.S. Or,	familiar with and 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>	<u>Name</u>	Address	Type of Action
MGR	Dawid Eduard Malan	7901 4th St N. Ste 300. St. Petersburg, FL 33702	□Adđ
			≣Remove
Executive Officer	Dawid Eduard Malan	7901 4th St N. Ste 300, St. Petersburg, FL 33702	≡ Add
			□Remove
0.15			□Change
Real Estate Broker Manager	Adriaan Louwrens Liebenberg	7901 4th St N. Ste 300, St. Petersburg, FL 33702	= Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			DChange
			🗆 Add
			□Remove
			Clen

D. If amending any other info	mation, enter change(s) he	ere: (Attach additional	sheets, if necessary.)		
			<u></u>	 	
		- -	-		
		 			
				200	
					ŧ
-				21	(TELLI (TELLI ()
				7S 3	
		·	T-11-11-1	NH 10: 32	C
				32	
					
		·			
E. Effective date, if other than (It'an effective date is listed, the date Note: If the date inserted in this document's effective date on the	nust be specific and cannot be price block does not meet the appli	cable statutory filing real	(optional) m 90 days after filing.) Pur direments, this date will	rsuant to 605,0207 (3)(b) I not be listed as the	J
If the record specifies a delayed effect record is filed.	tive date, but not an effective	time, at 12:01 a.m. on the	earlier of: (b) The 90	oth day after the	
Dated March 20	. 2023	7.			
•	TIPL	Jaev			
		forized representative of a m	ember		
-		Eduard Malan ted name of signee			

Filing Fee: \$25.00