119000023530

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<i>≠</i> ()
PICK-UP	■ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Certified Copies	_ Certificates	o o otatus
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:	Registration o	on Section f Corporations		
CHD IEA		EN JAMES PROPERTIES, LLC		
SUBJE	-l: <u></u>	Name of Lin	nited Liability Company	
		es of Amendment and fee(s) are sub	-	
		GAIL MARTIN-ABERC	ROMBIE	
			Name of Person	
		SIVYER BARLOW & W	'ATSON, PA	
			Firm/Company	
		401 EAST JACKSON ST	REET, SUITE 2225	
			Address	
		TAMPA, FL 33602		
		GABERCROMBIE@SBW		
For furth	er informat	ion concerning this matter, please o	(to be used for future annual report notifical):	ication)
		BERCROMBIE	813 221-4242	
	N:	ame of Person	at () Area Code Daytime	Telephone Number
Enclosed	l is a check	for the following amount:		
\$25 .	00 Filing Fe	ce S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

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

STEVEN JAMES PROPERTIES, LLC	
(Name of the Limited Liabilit (A Florida	ty Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C	ompany were filed on 1/22/2019 and assigned
Florida document number £19000023530	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ited liability company here:
The new name must be distinguishable and contain the words "Limi	ited 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 ADDR	(ESS)
	第二 <u>第</u> 二
Enter new mailing address, if applicable:	2 2
Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
	6 To 10 To 1
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	tered office address on our records, <u>enter the name of the nev</u> ress here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zin Code

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>	<u>Address</u>	Type of Action
AMBR	JAMES S. RODERICK	218 EAST BEARSS AVENUE, SUITE 368, TAMPA, FL 33613	
			□ Remove
			Change
AMBR	RODERICK, STEVE	218 EAST BEARSS AVENUE, STUITE 368, TAMPA, FL 33613	Add
			■ Remove
			Change
			
			Remove
		<u> </u>	Change
			Add
			Remove
			Change
		<u> </u>	Add
			Remove
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			□ Add
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	er than the date of till I, the date must be specific a ted in this block does not ate on the Department of	meet the applica	to date of filing or more to table statutory filing re-	(optional) han 90 days after filing.) Purs quirements, this date will i	uant to 605.0207 not be listed as
If the record specifies (b) The 90th day aft			an effective time	e, at 12:01 a.m. on t	he earlier of
Dated MARCH 20		2019			
			_		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00