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(Requestor's Na	me)
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PICK-UP WAIT	MAIL
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Certified Copies Certific	cates of Status
Special Instructions to Filing Officer	

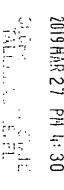
Office Use Only

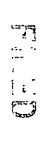


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R. WHITE APR 0 5 2019





### **COVER LETTER**

TO: Registration Se Division of Cor		•	•
SUBJECT: Del	CANE Y Prop-	enty Manage, ited Liability Company	ment, LLC
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Delanec		Janagement, LL J. Unit A
	Jamarac,	Address  4-1-3-3-3  City/State and Zip Code	7
	DE Gne The E-mail address: (1	o be used for future annual report notif	amail Com
For further information co	oncerning this matter, please ca		v
Adrian Name o	Liburd Person	at $(959)$ 559 Area Code Daytime	7652 Telephone Number
Enclosed is a check for th	ne following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

#### MAILING ADDRESS:

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 2010 NAD 07
2019 MAR 27 PM 4: 30
Delaney Property Management, LLC
Delane of the Limited Liability Company as it now appears on our records: (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed onand assigned
Florida document number <u>1 1900005962</u> 7

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	5188 PINE TI Tamar AC, 1	FL 33319
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	6188 Pine Unit A Tanarac, FL	Tree LN 33319
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.		nter the name of the new
Name of New Registered Agent:  New Registered Office Address:	Enter Florida street address	
· · · · · · · · · · · · · · · · · · ·	, Florid	la

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

#### 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	Hananeliburd	6188 Prines FreeholdilA	Add
			Æ(Remove
			Change
Mg.R	Britney B. Delaney	6188 Pine Tree Lillie Tamarac, FL 33319	A H D Add
	_	72077112	🗆 Remove
			Change
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	The address to the pusiness addre
_	Should be:
	6188 Pine Tree Lane
	Unit A
_	Tamarac, FL 33319
	/
_	
_	
_	
effec te: If	e date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies of the day after the record is filed.
he 9	·
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00