Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190001996183)))



	Doing	so will generate another cover sheet.	ξ
To:			ć
10.	Division of C	orporations	
		: (850)617-6383	
		<b>,</b>	
From:			7
	Account Name	: PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT	P.L. 🛴
	Account Numbe	r : 120040000167	•
	Phone	: (305)377-0809	
	Fax Number	: (305)377-0781	

Email Address: corporate@pbyalaw.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LENNOX PROPERTY MANAGEMENT, LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
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JUN 2-8-2019-----

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Corporate Filing Menu

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Fax Audit #: 1119000199618 3

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## **COVER LETTER**

TO: Registration Sec Division of Corp				
LENNOX P	ROPERTY MANAGEMENT,	LLC		
SUBJECT:	Name of Limit	ed Liability Company		
	Amendment and fee(s) are submidence concerning this matter to			
	Ricardo Bajandas, Esq.		<b>::</b> 1	2
		Name of Person		en ≅ _
	PBYA, PL		<u> </u>	7 NUL BE
		Firm/Company	· · ·	27
	283 Catalonia Avenue, Suit	te 200	ja T	. >
		Address	ALLADA EEF LUMP	بب
	Coral Gables, FL 33134			. <b>ຜ</b>
		City/State and Zip Code		
	corporate@pbyalaw.com E-mail address: (i	o be used for future annual report notific	ation)	
For further information c	oncerning this matter, please or	ill:		
Ricardo Bajandas		305 377-0086		
Name o	r Person	Area Code Daytime	Telephone Number	_
Enclosed is a check for the	he 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 I Certificate of Certified Cop (additional copy	'Status & oy
Regist Divisi	ING ADDRESS: ration Section on of Corporations 30x 6327	STREET/COURIE Registration Section Division of Corpora Clifton Building	1	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Fax Audit #: 11190001996183

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LENNOX PROPERTY MANAGEMENT, LLC		
(Nume of the Limited Liability Compa (A Florida Limited L	ny <u>us it now appears on our res</u> Liability Company)	orgs.)
The Articles of Organization for this Limited Liability Company	19 and assigned	
Florida document number L19000079015		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
		2 2
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "	LLC" or therabbreviation "L.L.C:"
Enter new principal offices address, if applicable:	111 NE 1st STREET	
(Principal office address MUST BE A STREET ADDRESS)	inter the new name of the limited Liability Company here:  Inter the new name of the limited Liability company here:  In the new name of the limited Liability Company," the designation "LLC" or therabbreviation "LLC" in the the order of the limited Liability Company," the designation "LLC" or the the order of the limited Liability Company," the designation "LLC" or the the order of the limited Liability Company," the designation "LLC" or the the order of the start of the limited Liability Company, the designation "LLC" or the order of the start of the limited Liability Company, the designation "LLC" or the order of the start of the st	
	MIAMI, FL 33132	
Enter new mailing address, if applicable:	111 NE 1st STREET	3. 3g
(Mailing address MAY BE A POST OFFICE BOX)	8th FLOOR # 316	>>
	MIAMI, FL 33132	ompany," the designation "LLC" or therabbreviation "LLC"  I NE 1st STREET  I FLOOR # 316  IAMI, FL 33132  I NE 1st STREET  I FLOOR # 316  IAMI, FL 33132  I NE 1st STREET  I FLOOR # 316  IAMI, FL 33132  Address on our records, enter the name of the new  Enter Florida street address  Florida
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her  Name of New Registered Agent:	ffice address on our rec e:	ords, enter the name of the new
New Registered Office Address:		
	Enter Florida street a	ddress
		., Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	i	
		I feether gored to comply with the

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

Page 1 of 3

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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

Title	<u>Name</u>	Address	Type of Action
MGR	ALKAHWAJI, RAPAT	111 NE 1ST STREET	
		8TH FLOOR #316	□ Remove
		MIAMI, FL 33132	☐ Change
MGR	KOEHL, CHRISTIAN	III NE IST STREET	
		8TH FLOOR #316	D.Add Ti
		MIAMI, FL 33132	Change C
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Filing Fee: \$25.00