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C. GOLDEN JUL 1 1 2019

COVER LETTER

Div	ision of Co	rporations		
SUBJECT:		AMIA PROPERTY LLC		
		Name of Lin	nited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	smitted for filing	
Please return	i all correspo	ondence concerning this matter	to the following:	
		DANIEL GROSSMAN		
			Name of Person	
		D & S MANAGEMENT		
			Firm/Company	
		9116 GRIFFIN ROAD		
			Address	
		COOPER CITY, FL 3332	8	
		dan@dsepafl.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For further in	nformation c	concerning this matter, please c	all;	
DANIEL GROSSMAN			954 680-7759	
	Name o	f Person	at () Area Code — Daytime	: Telephone Number
Enclosed is a	check for th	he following amount:		
■ \$25.00 F	iling 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:

TO:

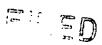
Registration Section

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



SEELY RAMIA PROPERTY LLC

2019 JUN 27 PH 3: 2

(Name 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 on 06/12/2019 and assigned

Florida document number 1.19000156186

This amendment is submitted to amend the following:

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

SEELEY RAMIA PROPERTY LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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 records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Enter Florida street address

___. Florida __

IGR = Manager MBR = Authorized Member					
<u>itle</u> GR	<u>Name</u> SEELY, FLOYD	Address	Type of Action		
		18664 SE 53RD PLACE OCKLAWAHA, FL 32179	■ Remove		
			Change		
GR	SEELEY, FLOYD	18664 SE 53RD PLACE OCKLAWAHA, FL 32179	■ Add		
			□ Remove		
			☐ Change		
			∩ Add		
			□ Remove		
			☐ Change		
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 (If an effective date is listed, the date mus 	of 10/2019 date of filing: st be specific and cannot be prior to date of filing or more than 90 cock does not meet the applicable statutory filing requirement of State's records.	days after filing.) Pursuant to 605 0207 (3)
f the record specifies a delayed b) The 90th day after the rec	d effective date, but not an effective time, at 1 ord is filed.	2:01 a.m. on the earlier of:
Dated JUNE 24	2019	
	Foll-Ramesol Signature of a member of authorized representative of a member	ur
LOSE WALL	Signature of a manufacture of a memory of	
JOSE RAMIA	Typed or printed name of signee	

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Filing Fee: \$25.00