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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
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. (Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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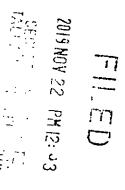
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## **COVER LETTER**

SUBJECT: _	Olivares	Properties, LLC		
bonder		Name of Limi	ted Liability Company	
The enclosed A	Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return a	ll correspon	dence concerning this matter t	to the following:	
		Elai	ine Olivares	
			Name of Person	
		Oli	vares Properties, LLC	
			Firm/Company	
		<u>34</u>	64 Heath Drive	
			Address	
		De	eltona, FL 32725	
			City/State and Zip Code	
			varesPropertiesFL@gmail.com  o be used for future annual report not	ification)
For further info	ormation co	ncerning this matter, please ca		incusion,
Ela	aine Olivar	es	at ( 201 ) 407-9279	
<del></del>	Name of	Person	at (201 ) 407-9279  Area Code Daytin	ne Telephone Number
Enclosed is a c	theck for the	e following amount:		
□ \$25.00 Fili	ing 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

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

Olivar	res Properties, LLC			
( <u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appe Limited Liability Company	ars on our records.)		
The Articles of Organization for this Limited Liability C Corida document number	ompany were filed on _	7/13/2019	and ass	igned
his amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ited liability company	here:		
he new name must be distinguishable and contain the words "Lim	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	RESS)			
Enter new mailing address, if applicable:			2010 M	**********
Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office additional agent.	tered office address ( ress here:	on our records, <u>ent</u> e	er-the name	of-the
Name of New Registered Agent:			; .· · · ω	
New Registered Office Address:	Enter Fi	orida street address	<del></del>	
		, Florida		
	Ciry	-	Zip 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>	Address	Type of Action
AMBR	Jose L Olivares	3464 Heath Drive	<b>⊘</b> I Add
		Deltona, FL 32725	□ Remove
			Change
			D Add
			□ Remove
		<del></del>	Change
		<del></del>	Add
			☐ Remove
			Change
			Add
		···	□ Remove
			Change
			Remove
			Change
			□ Add
			Remove
			☐ Change

	Authoried Representative: Elaine Olivares invested 51%
_	Authorized Member: Jose L Olivares invested 49%
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ciic <u>e:</u> I	ve 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 earl 90th day after the record is filed.
:d _	November 17, 2019.

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Filing Fee: \$25.00