

# L19000277600

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

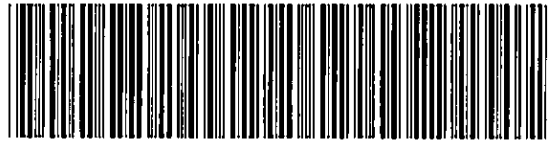
(Business Entity Name)

(Document Number)

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RECEIVED  
2019 DEC 27 PM 2:03  
TALLAHASSEE, FLORIDA

FILED  
2019 DEC 27 A 9:41  
TALLAHASSEE, FLORIDA

DEC 30 2019

T. LEMIEUX

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

(OFFICE USE ONLY)

Corporation Name & Document Number, (if known):

1. Shamballah Properties L.L.C.  
(Corporation Name) Document #

2. \_\_\_\_\_  
(Corporation Name) Document #

☒ Walk in \_\_\_\_\_ Pick up time \_\_\_\_\_  
\_\_\_\_\_ Mail out \_\_\_\_\_ Will wait \_\_\_\_\_  
\_\_\_\_\_ Photocopy ☒ Certified Copy

\_\_\_\_\_ Certificate of Status

**NEW FILINGS**

\_\_\_\_\_ Profit  
\_\_\_\_\_ Not for Profit  
\_\_\_\_\_ Limited Liability  
\_\_\_\_\_ Domesitication  
\_\_\_\_\_ Other

**AMMENDMENTS**

☒ Amendment  
\_\_\_\_\_ Resignation of R.A. Officer/Director  
\_\_\_\_\_ Change of Registered Agent  
\_\_\_\_\_ Dissolution/Withdrawal  
\_\_\_\_\_ Merger

**OTHER FILINGS**

\_\_\_\_\_ Annual Report  
\_\_\_\_\_ Fictitious Name

**REGISTRATION/QUALIFICATIONS**

\_\_\_\_\_ Foreign  
\_\_\_\_\_ Limited Partnership  
\_\_\_\_\_ Reinstatement  
\_\_\_\_\_ Trademark  
\_\_\_\_\_ Other

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SHAMBALLAH PROPERTIES LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing

Please return all correspondence concerning this matter to the following:

KENNETH NISTICO

Name of Person

Firm Company

17241 SW 112 PLACE

Address

MIAMI, FL 33157

City, State and Zip Code

JROJ081@YAHOO.COM

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

JUSTINA ROJAS

Name of Person

at ( )

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address: ✓

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

SHAMBALAH PROPERTIES LLC

(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 11/06/2019 and assigned  
Florida document number L19000277600

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

17241 SW 112 PLACE

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33157

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 Office Address:

Enter Florida street address

Florida

City

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>	<u>Address</u>	<u>Type of Action</u>
MGR	KENNETH NISTICO	17241 SW 112 PLACE	<input type="checkbox"/> Add
		MIAMI, FL 33158	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JUSTINA ROJAS DALGUERRI	17241 SW 112 PLACE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33157	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary)*

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. Pursuant to 605.0207 (3)(b)  
 Note: If the date entered on this block is the date of filing, then the effective date must be entered on this block.

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of (b) The 90th day after the record is filed

Dated DECEMBER 16

2019

Signature of a member or authorized representative of a member

Typed or printed name of signer