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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Pesch Propertymanagement LLC Name of Limited Liabilly Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Engelbert Pesch Name of Person
Pesch Propertymanagement UC
7010 Scrub Jay Dr
Sarasota FL 34241 Code
Pesch pro per Hmaha geinent @ 9 mail. com E-mail address: So be used for future annual report replication
For further information concerning this matter, please call:
<u>Marina Pesch</u> at (941) 600-9888  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
X \$25,00 Filing Fee Certificate of Status  Certificate of Status & Certificate 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

Pesch Propertymanagement L (Name of the Limited Liability Company as it now a (A Florida Limited Liability Company)	¿C
(Name of the Limited Liability Company as it now a 1A Florida Limited Liability Compa	ppears on our records.) iny)
The Articles of Organization for this Limited Liability Company were filed o	n <u>12/16/2019</u> and assigned
Florida document number <u>L / 9000 3050 46</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compar	<u>ıy here</u> :
	r 1
The new name must be distinguishable and contain the words "Limited Liability Company."	the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	:. CJ
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on o agent and/or the new registered office address here:	our records, <u>enter the name of the new register</u>
Name of New Registered Agent:	
New Registered Office Address:  Ento	r 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>	Address	Type of Action
<u>AMBR</u>	Varina Pesch	7010 Scrub Jay Dr., Sarasota, Fl 34241	_ XAdd
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Filing Fee: \$25.00