Electronic Filing Cover Sheet

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To:

. Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TIMELINE BUSINESS CENTER LLC

Account Number : I20150000034 Phone : (239)344-7417

Fax Number

: (888)344-7262

Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

Email Address: renato.fowler@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MCGREGOR PROPERTY MANAGEMENT LLC

| | وأرادات أربار المراطا والمستعدد والمنافع ومنابات والمراط |
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| Certificate of Status | 0 |
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Electronic Filing Menu

Corporate Filing Menu

Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATIO

ARTICLES OF ORGANIZATION OF

| : MCGREGOR PROPERT | Y MANAGEMENT LLC | | · · · · · · · · · · · · · · · · · · · |
|--|--|-----------------|---------------------------------------|
| (Name of the Limited Liability Coropar (A Florida Limited L | ny as it now appears on our re- liability Company) | cords.) | |
| The Articles of Organization for this Limited Liability Company Florida document number 120000227551 | • | | and assigned |
| This amendment is submitted to amend the following: | ability company here: ability Company," the designation "LLC" or the abbreviation "L.L.C." 1317 EDGEWATER DR# 1581 ORLANDO, FL 32804 C'' ORLANDO, FL 32804 C'' Cry Enter Florida street address Florida City Zip Code | | |
| A. If amending name, enter the new name of the limited liab | lity company here: | | |
| The new name must be distinguishable and contain the words "Limited Liabil | lity Company," the designation | 'LLC" or the al | bbreviation "L.L.C." |
| • | 1317 EDGEWATER DR# | 1581 | |
| Enter new principal offices address, if applicable: | ORLANDO, FL 32804 | | , |
| (Principal office address MUST BE A STREET ADDRESS) | | | 617 |
| | | - | 702 |
| | 1317 EDGEWATER DR | ± 1581 | •• |
| Enter new mailing address, if applicable: | | | 품 |
| (Mailing address MAY BE A POST OFFICE BOX) | | ~ | <u> </u> |
| | • | | 0 |
| 1 | address on our records 6 | enter the nai | me of the new regist |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: | audiess on our records, s | 311 | t t |
| | | | |
| 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 Agen | <u>t:</u> | | |
| I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office | te performance of my unit s provided for in Chapter | 605, F.S. C | r, if this document |

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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 |
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| Mective date, if other than the an effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the D | date of filing: the specific and cannot ock does not meet the | e applicable statuto | ing or more than 90 ry filing requiren | (optional) days after filing.) Pur- ments, this date will | suant to 605.0 not be liste |
| record specifies a delayed effectiv d is filed. | e date, but not an eff | ective time, at 12:0 | l a.m. on the car | lier of: (b) The 90 | th day after |
| August 26th | 202 | 0 | | | |
| C11 40 C3 | ······································ | · · · · · · · · · · · · · · · · · · · | | | |
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| anto | Signature of a member | er or authorized tenre | sentative of a mem |)er | |

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