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#### PLEASE USE FUNDS FROM ACCT : 120210000160 AMOUNT: \$60.00 AUTHORIZATION SIGNATURE: <u>famis 2</u> STARKÀ PROPERTIES MANAGEMENT <u>LLC</u> L21000067860

**Business** Name

Document Number, (if known):

\_\_\_\_ Walk in

\_\_\_\_ Pick up time\_\_\_\_\_

Will wait

\_\_\_\_ Mail out

Photocopy

\_\_X\_Certified Copy of Articles of Organization

\_\_X\_Certificate of Status

### NEW FILINGS

- Profit Not for Profit
- \_\_\_\_\_ Limited Liability
- \_\_\_\_Domestication
- \_\_\_Other
- \_\_\_ CORP

# **OTHER FILINGS**

\_\_\_\_Annual Report

\_\_\_\_Fictitious Name

\_\_\_\_\_APOSTIL ()\_\_\_\_\_ Country

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

### AMMENDMENTS

- <u>X</u> Amendment
- Resignation of R.A. Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- \_\_\_\_Merger
- \_\_\_Conversion

# **REGISTERATION/QUALIFICATIONS**

Foreign filing
 Limited Partnership
 Reinstatement
 Statement of Revocation of Dissolution
 Other

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### STARKA PROPERTIES MANAGEMENT, LLC

#### (<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

were filed on $\frac{2/17/221}{2}$	and assigned
ility company here:	
ity Company." the designation "L	LC" or the abbreviation "L.L.C."
<u> </u>	
address on our records, <u>ent</u>	
	PH 2 PH 2
	• · · · · ·
Enter Florida street add	iress
	Florida Zip Code
	ility company here: ity Company." the designation "L

#### 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 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>	<b>Type of Action</b>
AMBR	Jonathan Lickstein	9261 Gettysburg Rd., Boca Raton, FL 33434	□Add
			<b>=</b> Remove
			🗋 Change
MGR	Jonathan Lickstein	9261 Gettysburg Rd., Boca Raton, FL 33434	🖬 Add
			🗆 Remove
			□Change
			🗆 Add
			🗆 Remove
			Change
			🗖 Add
			CRemove
			Change
			🗆 Add
			🗋 Remove
			Change
			□Add
			□Change

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

·····
 <u> </u>

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 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.

Datud	January 24, 2022	
Dated	* * *	·

Charles Lee Signature of a member or authorized representative of a member

Charles E. Lee

Typed or printed name of signee