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Office Use Only

## **COVER LETTER**

10: Registration Section Division of Corporations
SUBJECT: COSSIMONS Property Management 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:
A STULL COSSINGA
asselmans Property Maraginest LLC
37 Caltus Cr. E
Inter Hauen, FC 33880
City/State and Zip Code  City/State and Zip Code  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
VI \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  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 8107  Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Limited Liability Company as it now appears on our (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 City 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  $t\overline{o}$  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>	Name	Address	Type of Action
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Filing Fee: \$25.00