## H21000150452

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
21		6/21/21

Office Use Only



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21 HAY 14 AH 9: 54

## **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT:		EM PROPERTIES, LLC		
SUBJECT.		Name of Lin	nited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please returr	all correspo	ondence concerning this matter	to the following:	
		CHRIS BUFFINGTON		
			Name of Person	<del></del>
		URBAN GEM PROPERT	IES, LLC	
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		5500 BEE RIDGE RD SU	ITE 203	
			Address	<del></del>
		SRASOTA, FL 34233		
			City/State and Zip Code	
		BUFFINGTONCHRIS@G		
			to be used for future annual report no	otification)
For further in	nformation c	oncerning this matter, please c	all:	
CHRIS BUF	FINGTON		352 5143543 at ()	
	Name o	f Person	Area Code Dayti	ime Telephone Number
Enclosed is a	a check for th	ne following amount:		
■ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Addres gistration S		Street Address: Registration S	lection
	•	orporations	Division of Co	
	D. Box 632	•	The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F A SECTION TAKES THE SECTION OF THE

URBAN GEM PROPERTIES, LLC

21 MAY 14 AM 9: 54

(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	y were filed on 3/31/2021	and assigned
Florida document number L21000150482		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company." the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del> </del>	
(Principal office address MUST BE A STREET ADDRESS)		
	<del></del>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records,	enter the name of the new registered
agent and of 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 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 21 MAY 14 AM 9: 54	Type of Action
AMBR	JAYANTI GOVINDJI	5580 CAPE LEYTE DR, SIESTA KEY, FL 34242	≣Add
		<del></del>	□ Remove
			□Change
			□Add
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			□Remove
			Change

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	<del></del>
ctive date, if other than the date of filin	5/06/2021 ag: (optional)
effective date is listed, the date must be specific and	d cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
e: If the date inserted in this block does not raintent's effective date on the Department of S	meet the applicable statutory filing requirements, this date will not be listed as State's records
ment's effective date on the Department of t	0.000.00
1 26 11 126 22 12 12 12	or of all a since as 12.01 and an all the section of (I). The Oost day of the section of
filed.	at an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ed MAY 6	2021
	·
18 19 1/21	

Typed or printed name of signee