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COVER LETTER

Division of Corporations	
11211 Page 114 11	
SUBJECT: VAN Properties U	nited Liability Company
The enclosed Articles of Amendment and fee(s) are sub	omitted for filing.
Please return all correspondence concerning this matter	to the following:
Victoria	Smith
VIC.10110C	Name of Person
	Firm/Company
3885 Trail	Ridge Rd
	<i>O</i> Address
Middle laura	£1 32065
Villettia Pacity	City/State and Zip Code
Victoria Ossa	nith C. small ion (to be used for future annual report notification)
E-mail address: ((to be used for fature annual report notification)
For further information concerning this matter, please o	all:
Mar Car	200 21111-2400
Victoria Smith	at (<u>281)</u> <u>344-3408</u> Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy Certificate of Status &
Centifeat o. Sanar	(additional copy is enclosed) Certified Copy (additional copy is enclosed)
Bladera or first pap	(additional copy is enclosed)
12 Colours of mile half	
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 30, 2021

VICTORIA SMITH 3885 TRAIL RIDGE RD MIDDLEBURG, FL 32068

SUBJECT: JAMEELA PROPERTIES, LLC

Ref. Number: L21000242458

We have received your document for JAMEELA PROPERTIES, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please complete the form in its entirety as some of the requires spaces were not filled in and you failed to sign the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 821A00023700

Irene Albritton Regulatory Specialist III 第3 0CT 12 PH 2:31

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Jameela Properties LLC	
(Name of the Limited Liability Company a (A Florida Limited Liab	as it now appears on our records.)
The Articles of Organization for this Limited Liability Company we	re filed on May 24 2021 and assigned
Florida document number 121000343 458	and assigned
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 C	Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	20
_	
	د است هدر سد .
Enter new mailing address, if applicable:	. 10
(Mailing address MAY BE A POST OFFICE BOX)	P :
	79
De tours at the desired and the	32
 If amending the registered agent and/or registered office addressed and/or the new registered office address here: 	ess on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	Zip Code
ew Registered Agent's Signature if changing Dagistand Anna.	

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
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			□Add
			□Remove
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	ther than the date of I ted, the date must be specific erted in this block does reduce on the Department		o date of filing or more to ble statutory filing rec	(optional) nan 90 days after filing juirements, this date	Pursuant to 605,0207 (will not be listed as t
record specifies a c lis filed.	clayed effective date, but	t not an effective tim	ee, at 12:01 a.m. on th	e earlier of: (b) The	90th day after the
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ned <u>Octobar</u>	11 1				
ared <u>UCtobur</u>	Signature of	f a member or authori	zed representative of a r	nambar	

Filing Fee: \$25.00