L21000365918

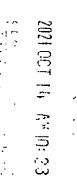
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,

Office Use Only



500374616595

10/14/21--01016--015 **25.00



IN PRUCE

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Allen & Allen Property Management Group Ll
The enclosed Articles of Amendment and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following:
Valeric Boss Name of Person
Allen & Allen Proporty Grays UC
2363 Rusty Lakes have
Jacksonville FL 32221 City/State and Zip Code
in Living 13 @ compasting
For further information concerning this matter, please call:
Valerie Boss at 904, 626-9833 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$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 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A Lea & Allea Pro (Name of the Limited Liability Comple (A Florida Limited	Derty Mana	and G	Comp LLC
The Articles of Organization for this Limited Liability Company Florida document number	^		d assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation	on "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>	20
(Principal office address MUST BE A STREET ADDRESS)			20 T
		; ;	
Enter new mailing address, if applicable:			ਤੇ ਹ
(Mailing address MAY BE A POST OFFICE BOX)			ည်
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>er</u>	nter the name of the	e new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street ac	ldress	
		. Florida	
	City	Zip C	Code

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.

New Registered Agent's Signature, if changing 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>	Name	Address	Type of Action
MGR	Gregory & Boss	2363 Rusty Lakes La.	_ WAdd
			□Remove
			□Change
			□Add
			□Remove
			Change
		<u>'</u>	
			_ Octange
			<u>-</u> □ 2330
			🗆 Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

		•
	17	•
		•
		-
		•
		-
		-
		_
	232	-
		-
		_
		_
	ယ 	_
ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more e: If the date inserted in this block does not meet the applicable statutory filing re ument's effective date on the Department of State's records.	(optional) than 90 days after filing.) Pursuant to 60 equirements, this date will not be lis	05.02 sted
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t is filed.		:!
Valerie Boss Typed or printed name of signee		
4.		

Filing Fee: \$25.00