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(Requestor's Name)	
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COVER LETTER

TO:

Registration Section

Division of Corp	orations		
SUBJECT: Ash ton	& Ashtan Prapa	ities LLC	
	Name of Lim	ited Liability Company	
	1		
The enclosed Articles of A	amendment and fee(s) are sub	onified for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	ALL		
	115 raham /+3h	Name of Person	
		Name of Person	
	An e 1	0 - 110	
	113 h ton ex /151140	Properties LLC	
		1 marcompany	
	15 N NE ME.	Charles Oc Apr 242	
	1301 30E 111AF	Address	
	Miani Fl.	33/79 City/State and Zip Code	
	1 1	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For hirther information co	ncerning this matter, please ca	all:	
About Aris		9/0 052 15/2	
Abrahan Ash+	Dancon	at (9/8) 853-3567 Area Code Daytime Telephone Number	
Nanc of	reison	Area Code Daytine Telephone Number	
Enclosed is a check for the	following amount:		
	/		
☐ \$25,00 Filing Fee	\$30.00 Fiting Fee & Certificate of Status	☐ \$55,00 Filing Fee & ☐ \$60,00 Filing Certified Copy Certificate of	-
	Centificate of Status	(additional copy is enclosed) Certified Co	
		(additional cop	
Mailing Address:	•	Street Address:	
Registration So		Registration Section	
Division of Co		Division of Corporations	
P.O. Box 6327	•	The Centre of Tallahassee	
Tallahassee F	1 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OF	
(Name of the Limited Liability Company as it now appears on our records. (A Florida Limited Liability Company))

(A Florida Limited Li	ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number $\angle 21000399103$	were filed on Sept. 8 2521 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil M/Δ	
M/A The new name inust be distinguishable and contain the words "Limited Liabilit	ty 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)	
	,
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
B. If amending the registered agent and/or registered office ac agent and/or the new registered office address here:	
Name of New Registered Agent: \(\square\square A \)	70 17 C
New Registered Office Address:	
New Registered Office Address.	Enter Florida street address Florida City Zip Coxle Zip Coxle
	City Zip Gode W
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is

company has been notified in writing of this change.

1/4
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
(00	Aubrey Ashton	1501 NE Miant Guilvis Or. Port	r≿_ □Add
		Mimi FL, 33179	Remove
			□Change
MGR	Valentin Ashbon	1501 NE Mon. Carlo D. 240	<u>∠</u> □Add
		Mini FC 33179	ZRemove
			□Change
MGR	Murvel Ashton	1501 NE Mim. Gasla, Dr.	tyt □Add
		Mini FL 33179	\(\int \text{Remove} \)
			□Change
AP	Jucob Arhton	150, NE Mini Garda, Dr Aer 240	<u>′</u> □Add
		Mim: FL 33179	Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
MGR_	Abrahan Ashton	1501 NE Minni Gordons Dr	□Add
		Apr 242	□Remove
		MILMI, FC 33179	_ Change
			□Adđ
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e date is liste	al, the date mus	t be specific	and cannot be pri	or to date of filing	or more than	90 days after fi	ling.) Pursuant to 605.026
					rinng requir	cincins, tras c	ane will not be fisted t
ecifies a de	layed effectiv	e date, but	not an effective	time, at 12:01 a	ı.m. on the e	arlier of: (b)	The 90th day after th
	15		2 21				
1CT 10) ·			·			
	1	1 .		_			
_		Signature of	of a member or aut	horized represent	ative of a mer	nber	
	Л						
	e date is liste le date inse s effective ecifies a de	e date is listed, the date music date inserted in this bles effective date on the Deceifies a delayed effective.	e date is listed, the date must be specific to date inserted in this block does not seffective date on the Department ecifies a delayed effective date, but	e date is listed, the date must be specific and cannot be prine date inserted in this block does not meet the applies effective date on the Department of State's record ecifies a delayed effective date, but not an effective	e date is listed, the date must be specific and cannot be prior to date of filing to date inserted in this block does not meet the applicable statutory is effective date on the Department of State's records. Signature of a member or authorized represent	e date is listed, the date must be specific and cannot be prior to date of filing or more than the date inserted in this block does not meet the applicable statutory filing requires effective date on the Department of State's records. ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the electric date of a member or authorized representative of a member of authorized represe	e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fine date inserted in this block does not meet the applicable statutory filing requirements, this case effective date on the Department of State's records. ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)