L22 000137298

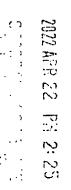
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	·
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	<u></u>	

Office Use Only



500386258155

04/22/22--01009--007 **25.00



Name Change

JUN 2 0 2022

D CUSHING

COVER LETTER

Registration Section Division of Corporations

TO:

	TIGE PROPERTIES LLC		
SUBJECT:	Name of Lim	nited Liability Company	_
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	PAUL V CLOUGH		
		Name of Person	
	THE TAX MAESTRO IN	С	
		Firm/Company	
	1751 US HIGHWAY 27 S	;	
		Address	
	SEBRING, FL 33870-492	0	
		City/State and Zip Code	2
	paul@taxmaestro.com		2022 APR
	E-mail address: (to be used for future annual report notification)	
For further information c	oncerning this matter, please c	all:	5
PAUL V CLOUGH		863 658-4357 at ()	, TB
Name of	f Person	Area Code Daytime Telephone Num	mber . S
Enclosed is a check for th	ne following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi:	O Filing Fee, ticate of Status & fied Copy ional copy is enclosed)
Mailing Addres Registration S	Section	Street Address: Registration Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee	
Tallahassee, I		2415 N. Monroe Street, Suit	e 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

A S PRESTIGE PROPERTIES LLC

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

(A Florida	Limited Liability Company)	<i>'</i> ~
The Articles of Organization for this Limited Liability Co Florida document number <u>L22000137298</u>	ompany were filed on 03/21/2022 	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
ANGELA SPEROS LLC		
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	(ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered	l office address on our records, <u>enter t</u>	ne name of the new registere
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Flor	ida
	City	ida
New Registered Agent's Signature, if changing Registered	d Agent:	
I hereby accept the appointment as registered agent of	and agree to act in this capacity. I had	her agree to comply with the

i nereby 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
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□ Change
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
		-	□Change
			□Add
			□Remove
			□ Change

-	
,	
-	
-	
-	
_	
-	
-	
-	
-	
-	
_	
-	
-	
E. Effect	ive date, if other than the date of filing:(optional)
Note:	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(but If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
docun	ent's effective date on the Department of State's records.
If the recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
record is fi	led.
	$M \cdot M \cdot$
Dated	(larel 11) foth
	1/2/1/2-1/
	FOIL MELK
	Signature of a member or authorized representative of a member
	PAUL V CLOUGH

Typed or printed name of signee