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COVER LETTER

TO:

то:	Registration Se Division of Cor			
era re	Tower Prop	erty LLC		
SUBJE	ω] ;	Name of Lim	ited Liability Company	
The encl	losed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Stephanie A. Young		
			Name of Person	
		Law Office of Stephanie A	Young, PLLC	\$1
			Firm/Company	•
		930 N. Congress Ave Suite	220	
			Address	
		Boynton Beach, FL 33426		AH C
		stephanie@saylawoffice.co	City/State and Zip Code	AH II: 02
		· • •	to be used for future annual report no	tification)
For furtl	ner information co	oncerning this matter, please c	all:	
Stephan	ie A. Young, Esq		561 853-0819	
	Name of	Person	at () Area Code Daytii	me Telephone Number
Enclosed	l is a check for th	ne following amount:		
■ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S Division of C P.O. Box 632 Tallahassec, F	Section orporations 7	Street Address: Registration Solivision of Co The Centre of 2415 N. Monta Tallahassee, F	orporations Tallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tower Property LLC		
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our records, ted Liability Company)	,)
The Articles of Organization for this Limited Liability Compa	any were filed on <u>04/04/2022</u>	and assigned
Florida document number L22000161319		
This amendment is submitted to amend the following:	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) ticles of Organization for this Limited Liability Company were filed on 04/04/2022 and assigned document number L22000161319 and assigned document is submitted to amend the following: mending name, enter the new name of the limited liability company here: Property Group LLC name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" new principal offices address, if applicable: N/A pal office address MUST BE A STREET ADDRESS) mew mailing address, if applicable: N/A pal office address, if applicable: N/A pal office address, if applicable: N/A pal office address MAY BE A POST OFFICE BOX) mending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: N/A New Registered Office Address:	
A. If amending name, enter the new name of the limited l	iability company here:	
Tower Property Group LLC		·- 1
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: N/A		<u> -</u>
· · ·	1	
Tracipal office address most be A STREET ADDRESS.		7.73m
		2 g
Enter new mailing address, if applicable: 🏿 🎢 🏲		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered offi	ce address on our records, enter t	he name of the new regis
gent and/or the new registered office address here:	· 	
Name of New Registered Agent: N/A		
New Registered Office Address:		
	Enter Florida street address	
	, Flo	riđa
	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 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
			□Remove
			□Remove
			; Add
			Remove
			O2 ———— □Change
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ive date, if other than the d	late of filing:		(optional)	
live date, if other than the d fective date is listed, the date must If the date inserted in this bloo	be specific and cannot be prior to) days after filing.) Pur	
nent's effective date on the Dep		,		
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January 17	2023			
January 17				
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Typed or printed name of signee