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## **COVER LETTER**

**Registration Section** 

**Division of Corporations** 

Tallahassee, FL 32314

TO:

OLD DECOM	roperties, LLC		
3018/15/211	Name of Lin	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Kendra Nassar		
		Name of Person	
	11 Man Properties, LLC		
		Firm/Company	W. 14.
	131 Talmeda Trail		
		Address	
	Maitland, FL 32751		
	·	City/State and Zip Code	
	charlesnassar@yahoo.com		
	E-mail address: (	to be used for future annual report no	otification)
For further information	concerning this matter, please c	all:	
Kendra Nassar		407 230-9613	
Name	of Person	Area Code Dayti	me 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 & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		Street Address: Registration S	ection
	Corporations	Division of Co	
P.O. Box 63	27	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

11 Man Properties, LLC		
( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our record d Liability Company)	<u>ds.)</u>
The Articles of Organization for this Limited Liability Company were filed on $\frac{05/09/2022}{1.22000218113}$		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liz	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC	O" or the abbreviation "L.L.C"
Enter new principal offices address, if applicable:		SEDI 11STO
(Principal office address MUST BE A STREET ADDRESS)		- 0.00 - 0.00 - 1.00
		0.01
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, <u>enter</u>	the name of the new register
Name of New Registered Agent:	, , , , , , , , , , , , , , , , , , , ,	7
New Registered Office Address:	Enter Florida street addre	
	, F1 City	lorida Zip Code
New Registered Agent's Signature, if changing Registered Agen	it:	
New Registered Agent's Signature, if changing Registered Agend I hereby accept the appointment as registered agent and agorovisions of all statutes relative to the proper and completaccept the obligations of my position as registered agent a change in the registered office company has been notified in writing of this change.	nt: gree to act in this capacity. I fu te performance of my duties, a s provided for in Chapter 605,	ind I am familiar with and F.S. Or, if this document
	nanging Registered Agent, Signature	of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Charles Nassar	131 Talmeda Trail, Maitland, FL 32751	<b>≣</b> Add
			□Remove
			□Change
			□Add
			Remove
			Change
			□ Add
			Remove
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Note: If the date inserted in the	the date of filing:  e must be specific and cannot be prior to date of filing his block does not meet the applicable statutory he Department of State's records.	(optional) or more than 90 days after filing.) Pursuant to 605.0207 filing requirements, this date will not be listed as
record specifies a delayed eff d is filed.	ective date, but not an effective time, at 12:01 a	a.m. on the earlier of: (b) The 90th day after the
Dated July 7	. 2022	
Dated Herale	a Nappar Signature of a member or authorized representa	