L22 000 330 988

(Requestor's Na	me)
(Address)	
(Address)	
(,	
(City/State/Zip/P	hpne #)
	MAIL
(Business Entity	Name)
(Document Num	Hoc)
(Document Num	
Certified Copies Certific	ates of Status
Special Instructions to Filing Officer:	<u> </u>
Special instructions to rising Oncer.	
Office Use	Only MIN
	· / A



10/03/22--01033--006 **30.00

22 OCT - 3 AH 4: 57

	•	

COVER LETTER

TO: Registration Section Division of Corporations

PERIGAN PROPERTIES LLC

SUBJECT: ____

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

 SHEVAUN GANDY

 Name of Person

 PERIGAN PROPERTIES LLC

 Firm/Company

 980 NE 151ST ST

 Address

 ORTH MIAMI BEACH, FL. 33162

 City/State and Zip Code

 SHEVAUNGANDY@GMAIL.COM

 E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:



		O DRGANIZATION	
)F	
	PERIGAN PROPERI		
(<u>Name of</u>	<u>the Limited Liability Comp:</u> (A Florida Limited	ny av it now appears on our records.) Liability Company)	
The Articles of Organization for this L Florida document number	imited Liability Company 0988	were filed on	and assigned
This amendment is submitted to amend	the following:		
A. If amending name, <u>enter the new</u>	name of the limited liab	ility company here:	
The new name must be distinguishable and co	ntain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address,	if applicable:	980 NE 151ST ST	
(Principal office address MUST BE A	<u> STREET ADDRESS)</u>	NORTH MIAMEBEACH, FL. 33162	<u> </u>
			001 -3
Enter new mailing address, if applic		NORTH MIAMI BEACH, FL. 33162	
<u>{Mailing address MAY BE A PO\$T 0</u>			<u> </u>
B. If amending the registered agent agent and/or the new registered offic	-	address on our records, <u>enter the name</u>	e of the new register
Name of New Registered Ag	ent:	<u></u>	
New Registered Office Addr	<u></u>	Enter Florida street address	
		, Florida	
1			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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
		 	🗆 Add
			🗆 Remove
			Change
<u></u>		 	🗆 Add
			Пспюче
	<u></u>	 	Add Add BRemove
		 	🛛 Add
			🗆 Remove
			Change
		 	🗆 Add
		<u></u>	🗌 Remove
			🗆 Change
		 	🗆 Add
			ПКспюче
			Change

•		,	,	
	•	•		

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

•

<u> </u>							
						<u> </u>	
		1		······			_
	- p p		···				
				·	·		
		· · · · · · · · · · · · · · · · · · ·					
	<u> </u>						
		ļ			<u></u>		
						22	-
						00	
					<u> </u>		
			<u> </u>		<u> </u>		<u></u>
						 58	
					· · · · · · · · ·	<u> </u>	
E. Effective date. (If an effective date	if other than the	e date of filing	g	late of filing or me	ore than 90 days after	onal) r filing) Pursuant to	605 0207 (3)(b)
Note: If the date	e inserted in this	block does not n	neet the applicabl	c statutory filing	g requirements, thi	is date will not be	listed as the
document's effec	ctive date on the	Department of S	tate's records.				
		• • • • · ·	60	12.01		The Other day.	wites the
If the record specifies record is filed.	s a delayed effect	ive date, but not	an effective time	, at 12:01 a.m. c	on the carrier of: (t)) - ine sourcay i	
	MBER 28		2022				
Dated		<u> </u>					
		Landry					
<u></u>		Signature of a r	nember or authoriz	ed representative	of a member		-
		:	SHEVAUN GAN	\$DY			
		<u> </u>	Typed or printed (name of signee			-

Filing Fee: \$25.00