## L24 000413132

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

	Ianagement Properties LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Steven J Beaudry				
		Name of Person			
		Firm/Company			
	2601 W Marion Ave Apt 9	92A 			2024 OCT -9 NM 10: 5
		Address			CT
	Punta Gorda, Florida 3395	50		<u>.</u> ,	9
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code		}	3
	officerbeaudry@gmail.com			· 	Ö
	E-mail address: (	to be used for future annual report notif	ication)	المنت	<u></u>
For further information	concerning this matter, please c	all:			
Steven J Beaudry		414 467-8761 at ( )			
Name	of Person	Area Code Daytime	Telephone Number	<del></del> -	
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)	Certified (	e of Status &	
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of Ta	oorations allahassee	0	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Anchor Management Properties LLC		
( <u>Name of the Limited Liability Comp</u> e (A Florida Limited	iny as it now appears on our records Liability Company)	<u>.</u> )
The Articles of Organization for this Limited Liability Company Florida document number 124000413132	were filed on September 23, 202	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation 1C."
Enter new principal offices address, if applicable:		8
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
(maning maness may DEA 1051 OFFICE BOA)		. <del></del>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street address	
	, Flo	rida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and provided for in Chapter 605, I	d I am familiar with and F.S. Or, if this document is

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>	<u>Address</u>	Type of Action
AMBR	Steven J Beaudry	2601 W Marion Ave Apt 92A	Add
		Punta Gorda, FL 33950	Remove
			□Change
			□Add
			Add
			□ Add □ □ Remeye
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Note:	ive date, if other the fective date is listed, the case inserted in the date inserted in tent's effective date or	this block does n	not meet the app	licable statutory	(o or more than 90 days a filing requirements,	ptional) after filing.) Pursuar this date will not	nt to 605.0207 (3 be listed as th
he recor ord is fil	rd specifies a delayed of led.	effective date, but	not an effective	e time, at 12:01 a	.m. on the earlier of	f: (b) The 90th d	lay after the
Dated	10/03/20	24	_·	<u> </u>			
		Signature of	of a member or au	thorized represent	ative of a member		

Filing Fee: \$25.00