## L24000436819

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## **COVER LETTER**

TO: Registration So Division of Co		
SUBJECT: IN THI	MIDDLE PROPERT	Y MANAGEMENT, LLC
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.
Please return all correspo	ondence concerning this matter	to the following:
	3 NHOL	. colón
		Name of Person
SUBJECT: IN THE MIDDLE PROPERTY MANAGEMENT, LLC  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:		
	<del></del>	Firm/Company
	9600 GRIFF	IN RD
		<del></del>
	cooper at	Y,FL <b>3</b> 3328
		City/State and Zip Code
Car further information o		·
rot luturi miormanon e	oncertaing this matter, please co	aii.
JOHN E. C	OLON	at (954 ) 654 - 8212
Name o	f Person	Area Code Daytime Telephone Number
Enclosed is a check for the	ne following amount:	
□ \$25.00 Filing Fee		Certified Copy Certificate of State (additional copy is enclosed) Certified Copy
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IN THE MIDDLE PROP	PERTY MANAGEMENT, LLC			
(Name of the Limited Liabilit (A Florida	ty Company as it now appears on our records.) Limited Liability Company)	)		
he Articles of Organization for this Limited Liability Co	ompany were filed on 10/11/202	4	and ass	signed
lorida document number L24000496819	_·			
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the limi	ted liability company here:			
ne new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LEC" of	or the abbrev	ia <mark>lig</mark> n "L.	IC."
nter new principal offices address, if applicable:		7:	DEC	(mp.e. en 2 € 2 € 2 mp.(2) (a)
Principal office address MUST BE A STREET ADDR	RESS)	<u> </u>		User-m Cherring
		· · · · · · · · · · · · · · · · · · ·	<u>F</u>	
nter new mailing address, if applicable:			in in	
Mailing address MAY BE A POST OFFICE BOX)				
		···		
. If amending the registered agent and/or registered gent and/or the new registered office address here:	d office address on our records, <u>enter th</u>	<u>ie name ol</u>	the nev	w registe
Name of New Registered Agent:		<u>.</u>		
New Registered Office Address:				<u></u>
	Enter Florida street address			
	, Flor	ida	· , , + , i	
	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 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
MGR	JOSEPH BARONE	905NE 29th Dr. WILTON MANORS, FL 33834	<b>■</b> Add
			□Remove
			□Change
		<del></del>	□Add
			□Remove
			□Change
	<del></del>		□ Add
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			□Change

	<u>-</u>
	<del></del>
	<del></del>
Effective date, if other than the date of filing:	to 605,0207 ( oc listed as t
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day rd is filed.	y after the
Dated 12 9 20 24	
Significance of a member or authorized representative of a member	_
JOHN E. COLON	

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