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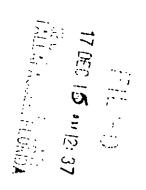
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· COVER LETTER

TO:	Registration Se Division of Cor		, ea	
SUBJE		est Communications, LLC	.₽	
30001		Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		ANITA WARMING		
			Name of Person	
		INSPIRED VINTAGE HO	ме	
			Firm/Company	
		9556 HISTORIC KINGS F	ROAD SOUTH	
			Address	
		JACKSONVILLE FL 322:	57	
			City/State and Zip Code	
		anita@inspiredvintagehome		
		E-mail address: (to be used for future annual report notific	cation)
For fur	ther information c	oncerning this matter, please ea	ill:	
ANITA	A WARMING		904 838-2725 at ()	
	Name of	f Person	at ()	Telephone Number
Enclose	ed is a check for th	e following amount:		
□ \$ 2:	5.00 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 Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	(Name of the Limiter	d Liability Company	s as it now appears	on our records.)	
Florida document number L12000059224 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: INSPIRED VINTAGE HOME, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 9556 HISTORIC KINGS ROAD SOUTH SUITE 304 JACKSONVILLE FL 32257 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 1ACKSONVILLE Florida street address JACKSONVILLE Florida street address	(,	A Florida Limited Li	ibility Company)		H
A. If amending name, enter the new name of the limited liability company here: INSPIRED VINTAGE HOME, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 9556 HISTORIC KINGS ROAD SOUTH		ibility Company v	vere filed on May	2, 2012	
INSPIRED VINTAGE HOME, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 9556 HISTORIC KINGS ROAD SOUTH		J			2 3
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.C." or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 9556 HISTORIC KINGS ROAD SOUTH SUITE 304 JACKSONVILLE FL 32257 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered Agent: New Registered Office Address: 9556 HISTORIC KINGS ROAD SOUTH Enter Florida street address JACKSONVILLE Florida 32257	·	the limited li <u>abil</u>	ty company her	<u>'e</u> :	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 9556 HISTORIC KINGS ROAD SOUTH		orde "Limited Liabilit	v Company " the des	ignation "LLC" or the	abbreviation "L.L.C."
SUITE 304 JACKSONVILLE FL 32257	- -				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 9556 HISTORIC KINGS ROAD SOUTH	• • • • • • • • • • • • • • • • • • • •		SUITE 304		
SUITE 304 JACKSONVILLE FL 32257	Trincipal Office address Prost DE A STREET	ADDRESSY	JACKSONVII.LI	E FL 32257	
SUITE 304 JACKSONVILLE FL 32257	Enter new mailing address, if applicable:		9556 HISTORIC	KINGS ROAD SOU	JTH
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent:	• • • • • • • • • • • • • • • • • • • •	BOX) SUITE 304			
Name of New Registered Agent: New Registered Office Address: Post			JACKSONVILLI	E FL 32257	· · · · · · · · · · · · · · · · · · ·
Florida street address JACKSONVILLE Florida 32257	registered agent and/or the new registered offi			our records, <u>ente</u>	er the name of the nev
Florida street address JACKSONVILLE Florida 32257		9556 HISTORIC	KINGS BOAD S		
JACKSONVILLE , Florida 32257	New Registered Office Address:	7770 THSTORIC			
		JAČKŠONVILLI	3	1731 1.1	32257
				, Fiorida]	Zip Code

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			
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cument's effective date on the Dep	artment of State's records.			
record specifies a delayed e	effective date, but not	an effective time	e. at 12:01 a.m.	on the earlier
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