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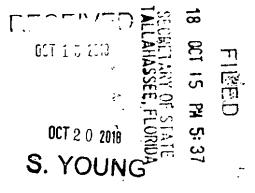
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COVER LETTER

Division of Co	rporations			
SUBJECT: Ur	angelake prope	Ities to Florida	1 LLC	
	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Yve	ling Chem Name of Person		
		Name of Person		
	Orange lake	Epoperties Flor Firm/Company	idu UC	
	2432 Dahla	oren Menz		g G B B
	Wilnter genr	den FC 34787 City/State and Zip Code		ELECTION TO PLANT TO
	Orange luke!	to be used for future annual report notif	, · · · · · · · · · · · · · · · · · · ·	FLOR SIA
	E-mail address: (to be used for future annual report notif	fication)	
For further information of	concerning this matter, please c	all:	•	
Yneying	Chen	at (497) 9249/ Area Code Daytime	133	
/ / Namico	f Person	Area Code Daytime	: Telephone Number	
Enclosed is a check for the	he 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 Stal Certified Copy (additional copy is en	tus &

MAILING ADDRESS:

Registration Section

TO:

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

Oranse Lake	properties flinda LLC
(Name of the Limit	Disperites flining LLC ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Li	ability Company were filed on 6/30/2018 and assigned 5527.
This amendment is submitted to amend the follo	owing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:
(Principal office address MUST BE A STREE	٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠
Enter new mailing address, if applicable:	PALASSI IS
Mailing address MAY BE A POST OFFICE E	30X)
egistered agent and/or the new registered off	
Name of New Registered Agent:	Yueying Chen 2432 De, la Laren Way Enter Florida street oddress Winter genden, Florida 34787 City Zip Code
New Registered Office Address:	2432 Dollaren Way Enter Florida street address
	Winter gerden Florida 34787
	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.

15 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>	Address	Type of Action
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			Change
MCzR	Yneying Chan		∠B Add
			Remove
			Change
			المستق
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ument's effective d	ate on the Department of	of State's records.			
record specifies	a delayed effective	e date, but not a	n effective time	, at 12:01 a.m	. on the earlier o
he 90th day aft	er the record is file	d.			
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Page 3 of 3

Filing Fee: \$25.00