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COVER LETTER

	ration Section on of Corpor			`	
MOR-LAND, L.L.C. 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: Lee Montgomery Gause Name of Person MOR-LAND, L.L.C. Firm/Company 4626 Highway 90 Address Marianna. Florida 32446 City/State and Zip Code ushomes32447@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:					
The enclosed A	Lee Montgomery Gause Name of Person MOR-LAND, L.L.C. Firm/Company 4626 Highway 90 Address Marianna, Florida 32446 City/State and Zip Code ushomes32447@yahoo.com E-mail address: (to be used for future annual report notification)				
Please return all	corresponde	nce concerning this matter	to the following:		
		Lee Montgomery Gause			
			Name of Person		-
		MOR-LAND, L.L.C.			
			Firm/Company		•
		4626 Highway 90			
			Address		
		Marianna, Florida 32446			
		shames 32447@yahaa can			•
				ort notification)	
For further infor	rmation conc	erning this matter, please ca	all:		
Lee Montgomer	ry Gause		850 482-50 at ()	056	
	Name of Per	son		Daytime Telephone Number	,
Enclosed is a ch	eck for the fe	ellowing amount:			
☐ \$25.00 Filir	ng Fee 🛚 🗓	■ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	d) Certified	te of Status &
Regist Divisi P.O. E	g Address: tration Section of Corp Box 6327 hassee, FL	orations	The Centre 2415 N. M		10

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MOR-LAND, L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{08/04/2000}{}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" 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: Enter Florida street address City 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 \widehat{agree} to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and Fam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.Of. if This document is being filed to merely reflect a change in the registered office address. I hereby confirm that the smitel 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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Lee Montgomery Gause	4626 Highway 90	= Add
			□Remove
		Marianna, Florida 32446	□Change
			□Remove
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<u>. </u>	 		□Add
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	he date of filing	cannot be prior to date	e of filing or more than	(optional) 90 days after filing.) Pursu	ant to 605,0207
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Fan effective date is listed, the date respective for this locument's effective date on the record specifies a delayed effect d is filed. December 3	nust be specific and block does not m Department of St	an effective time, a		arlier of: (b) The 90th	