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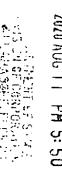




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COVER LETTER

	operties, LLC		
SUBJECT:	Name of Limit	ed Liability Company	
	John Schaye		
		Name of Person	
	Name of Limited Liability Company and Articles of Amendment and fee(s) are submitted for filing. In all correspondence concerning this matter to the following: John Schaye Name of Person Schaye Properties, LLC Firm/Company 3449 Winding Oaks Drive Address Longboat Key, Florida 34228 City/State and Zip Code DS Chaye @ and l. Com E-mail address: (to be used for future annual report notification) Information concerning this matter, please call: ye Name of Person Name of Person Taken Code Daytime Telephone Number		
		Firm/Company	
	3449 Winding Oaks Drive		
		Address	
	Longboat Key, Florida 342	28	
	L . 1.	City/State and Zip Code	~
	DSCNaye E-mail address: (1	to be used for future annual report not	ification)
For further information	n concerning this matter, please ca	all:	
John Schaye		at (847)	
Nam	e of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	r the following amount:		
\$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Registration of P.O. Box 6	n Section f Corporations 3327	Registration So Division of Co The Centre of 2415 N. Monn	orporations Tallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 07/01/2002 and assigne Florida document number L02000016738 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 "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: John Schaye Name of New Registered Agent: 3449 Winding Oaks Drive New Registered Office Address: Enter Florida street address Longboat Key

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 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>	Name	Address	Type of Action
MGR	Edward N. Schaye		□Addd
			BRemove
			☐ Change
MGR	John Schaye		■ Add
			☐ ☐ Remove
			Change
			□ Add
			CRemove
			□Add
			□Remove
			Change
			□ Add
			CRemove
			□ Change
			□Add
			□ Remove
			Change

mendi	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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ste: If	re date, if other than the date of filing:	ursuant to 605.03 ill not be listed
ecord s	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The fd.	90th day after t
ted	30 July 2020.	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00