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COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Aovida's Properties, 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:

Name of Person

Robert C. Gebhardt

Firm/Company

Gebhardt Law Firm

Address

25 Lakeview Drive

City/State and Zip Code

Whispering Pines, NC 28327

skipgebhardt@earthlink.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Gebhardt

at Area Code 910 949-0443

Daytime Telephone Number

Enclosed is a check for the following amount:

X \$25.00 Filing Fee □

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aovida's Properties, LLC

(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 August 26, 2004 and assigned Florida document number . L04000063470FE.

This amendment is submitted to amend the following:

Enter new principal offices address, if applicable:

545 Lighthouse Way Sanibel Island, Fl. 33957.

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

545 Lighthouse Way

Sanibel Island, Fl. 33957.

(Mailing address MAY BE A POST OFFICE BOX)

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: Colin Flinn

New Registered Office Address: 545 Lighthouse Way

Sanibel Island, Fl. 33957.

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

Title Name Address Type of Action

MGR Uweda Aous 8950 SW 74th Ct., Ste 2004, Miami, FL 33156 X- Remove

MGR Colin Flinn 545 Lighthouse Way, Sanibel Island, Fl. 33957. X- Add

E. Effective date, if other than the date of filing: Not Applicable (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated September 1, 2015

Signature of a member or authorized representative of a member

WEST OAK, LALO MEMBER

By: Colin Flinn, MGR of West Oak, LLC MBR

SECRETARY OF STATE