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SECRETARY OF STATE ALLAHASSEE, FLORIDA 2018 MAR | L PM |:

COVER LETTER

	vision of Corp					
SUBJECT:		C PROPERTIES GROUP, LL	С			
Name of Limited Liability Company						
The enclose	ed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please retur	n all correspor	ndence concerning this matter	to the following:			
		ROZANNA MALTBIE				
			Name of Person			
		STRATEGIC PROPERTIE	ES GROUP, LLC			
			Firm/Company			
		14851 STATE ROAD 52 U	JNIT 107 SUITE 440			
			Address	· ·		
		HUDSON FL 34669-4061				
			City/State and Zip Code	 		
		rmaltbie@spgfl.com				
For further	information co	ncerning this matter, please ca	to be used for future annual report notificall:	eation)		
ROZANNA	MALTBIE		813 994-5252 at ()			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed is	a check for the	e 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 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

STRATEGIC PROPERTIES GROUP, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 06/28/2005 The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number L05000064330 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." 14851 STATE ROAD 52 UNIT 107 Enter new principal offices address, if applicable: SUITE 440 (Principal office address MUST BE A STREET ADDRESS) HUDSON FL 34669-4061 14851 STATE ROAD 52 UNIT 107 Enter new mailing address, if applicable: **SUITE 440** (Mailing address MAY BE A POST OFFICE BOX) HUDSON FL 34669-4061 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 Florida 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>	<u>Name</u>	Address	Type of Action
AMBR	JEAN L SHORTS	5642 WHITE IBIS LANE	■ Add
		LAND O'LAKES FL 34638	☐ Remove
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un effective dan o <mark>te:</mark> If the da	e, if other than the is listed, the date nate inserted in this fective date on the	nust be specific block does n	and cannot be proof of meet the app	licable statutory	g or more than 90 of filing requirements	(optional) days after filing.) ents, this date v	Pursuan will not	it to 605.02 be listed
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Filing Fee: \$25.00