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JIVISION OF CORPORATIONS

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Gulf Was 7 Proper 74 Solutions 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:	
Anthony Villasuso Name of Person	
Gultwast Paupenty Solutions, LL	C
35246 US Huy 19 W #102 Address	
PALM HARBON FL 346PY City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Anthony Villasuso at (727) 687-615. Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee U\$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee & Certified Copy (additional copy is enclosed) \$25.00 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

(Name of the Limited Liability Company as it now appears on our records.)	n
(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 7/1/2005 and assign Florida document number LOSOOOGO & P3	DINISION OF
This amendment is submitted to amend the following:	CORPORATION
A. If amending name, enter the new name of the limited liability company here:	
GUIFCOAST PROPERTY SOLUTIONS, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abb	- 8
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abb "L.L.C."	reviation
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 t registered agent and/or the new registered office address here:	<u>he new</u>
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	
, Florida, 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 608, 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGRM	Billie Cecilia Fu	nd En burk	Add
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		PALM Harbor, Fel	34684
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	ATT A Company of the		COMBORATION AS A MILLED STATE
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			Remove

D. If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
		-
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Dated	4/15/13	-
	Signature of a member or authorized representative of a member	
	A~ 70~10 VillAJ4JO, MA~Aging/ Typed or printed name of signee	hember
	Page 3 of 3	

Filing Fee: \$25.00

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SECRETARY OF STATE DIVISION OF CORPORATION