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HAR 1 2 2019 T. LEMIEUX

## **COVER LETTER**

TO:				
SUB 1F		DICKS REALTY LLC		
.,00,712		Name of Lim	ited Liability Company	<del></del>
The enci	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	etum all correspo	ondence concerning this matter	to the following:	
		A. LEONARD DICKS		
			Name of Person	<del></del>
		LEONARD DICKS REAL	Name of Limited Liability Company  ee(s) are submitted for filing. g this matter to the following:  D DICKS  Name of Person  ICKS REALTY LLC  Firm/Company  Address  FLORIDA 32056-0075  City/State and Zip Code  GMAIL.COM  tail address: (to be used for future annual report notification)  ter, please call:  at (	
			Firm/Company	···
Division of Corporations  LEONARD DICKS REALTY 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:  A. LEONARD DICKS  Name of Person  LEONARD DICKS REALTY LLC  Firm/Company  PO BOX 75  Address  LAKE CITY, FLORIDA 32056-0075  City/State and Zip Code  FLGALAND@GMAIL.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  A. LEONARD DICKS  A. LEONARD DICKS  at (  Area Code Daytime Telephone Number)  Enclosed is a check for the following amount:  S25.00 Filing Fee Scertified Copy (cathibioanal copy is enclosed)  Certificate of Status  Certified Copy  (cathibioanal copy is enclosed)				
			Address	· · · · · · · · · · · · · · · · · · ·
	PO BOX 75  Address  LAKE CITY, FLORIDA 32056-0075  City/State and Zip Code  FLGALAND@GMAIL.COM  E-mail address: (to be used for future annual report notification)			
			City/State and Zip Code	
		FLGALAND@GMAIL.CO	DM .	
		E-mail address: (	to be used for future annual report notifi	ication)
For furth	ner information c	oncerning this matter, please or	all:	
A. LEO	NARD DICKS			
Name of Person				Telephone Number
Enclosed	d is a check for th	he following amount:		
<b>\$</b> 25.	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	MAIL	ING ADÐRESS:	STREET/COURI	ER ADDRESS:

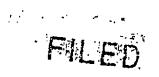
Registration Section

TO:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



LEONARD DICKS REALTY LLC

2015 MAR - 4 A 12 BA

(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	y Company were filed on $\frac{08}{}$	8/29/2005	ALL AHA SAF E SELLORIOA
Florida document number 1.05000085328			
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company he	ere:	
FLORIDA LAND NETWORK LEONARD DICKS LLC			
The new name must be distinguishable and contain the words "I	Limited Liability Company," the d	designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>		<u>.                                    </u>
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or re		ı our recor	ds, enter the name of the new
registered agent and/or the new registered office a	daress nere:		
Name of New Registered Agent:			
Name of New Registered Agent.			
New Registered Office Address:	P P!	rida street add	
	Enter Floi	rida street add	reas
	CV.	, !	F <b>lorida</b> Zin Code
	City		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 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

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effective date e: If the date	if other than the da is listed, the date must be inserted in this block trive date on the Depart	e specific and cannot b k does not meet the	se prior to date of fili applicable statutor	ng or more than 90 di	(optional) sys after filing.) Pursuan nts, this date will not	t to 605,020 be listed as
	cifies a delayed e ly after the recor		ut not an effec	tive time, at 1:	2:01 a.m. on the	earlier o
ed	RY 11	1019				

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Typed or printed name of signee

Filing Fee: \$25.00