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COVER LETTER*

		istration Secti sion of Corpo			
SUBJEC		Cartier Du Mo			
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The encl	osed	Articles of Ar	mendment and fee(s) are sub	mitted for filing.	
Please re	tum	all correspond	lence concerning this matter	to the following:	
			SICA NACU		
			Name of Person		
			EAL ESTATE INVESTMENT AND MANAGEMER		
				FirnvCompany	
			713 7		
For furth	ner in	formation con	ti-mail address: (cerning this matter, please co	to be used for future annual report notification) all:	FIL Jul 21
SICA N.	ACU	i		407 314 2825	FILED III
Paralla de	1:	Name of P	erson following amount:	Area Code Daytime Telephone Number	T + 00
5 25.	00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified (e of Status &

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

CARTIER DU MONDE REAL ESTATE INVESTMENT AND MANAGEMENT, LLC (Name of the Limited Liability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on 07/20/2007 and assigned Florida document number $\frac{1.07000074952}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CARTIER DU MONDE, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." SICA NACU Enter new principal offices address, if applicable: 1311 S PARK AVENUE (Principal office address MUST BE A STREET ADDRESS) SANFORD FL 32771 1311 S PARK AVENUE Enter new mailing address, if applicable: SANFORD FL 32771 (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: SICA NACU Name of New Registered Agent: 1311 S PARK AVENUE, New Registered Office Address: Enter Florida street address SANFORD Cin

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 Address <u>Title</u> Name | Type of Action _□ Add _□ Remove _□ Change _□ Add _□ Remove _□ Change \square Add _□ Remove _ Change _D Add _□ Remove ☐ Change _□ Change □□ To Add ☐ Remove _____

Change

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		06/15/2017		b	
ective date, if other than the effective date is listed, the date	must be specific and o	cannot be prior to date	of filing or more than 9	(optional) 0 days after filing.) F	Pursuant to 605,02
e: If the date inserted in this ument's effective date on the	s block does not me	eet the applicable st	atutory filing require	ments, this date w	ill not be listed
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record specifies a dela	ved effective da	ate but not an i	effective time lat	12:01 a.m. oi	n the earlier
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Filing Fee: \$25.00