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COVER LETTER

TO: Registration Sect Division of Corpo			
SUBJECT: 2	ake Share Reson	YELLC ted Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are subr	nitted for filing.	
Please return all correspond	lence concerning this matter t	to the following.	
	William +	Brantley I	
	Lake Shor	e Rosey HUC Firm/Company	
	417 E I	Tryterlala DVd	
	Lake f	City/State and Zip Code	
	Of-100 D E-mail address: (t	cantled (2015) vu clibry (violation) (violation)	C (NY)
For further information cor	ncerning this matter, please ca		
Bill Bi Name of 1 Enclosed is a check for the	Ciscili ()	at (<u>St.S.) LLCS (</u> Area Code Daytime	D&& Telephone Number Telepho
\$25.00 Filing Fee	□ \$30 00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Cortificate 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 266) Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lake Stare Res		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>LOTOCOS (4583</u>).	were filed on 8/17/2007	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab \mathcal{N}/\mathcal{A} The new name must be distinguishable and contain the words "Limited Liabi		e abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	<i>ν</i> / _Α	
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		ter the name of the new
Name of New Registered Agent:	N/A	3 jn
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 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	<u>Name</u>	Address	Type of Action
AMBR	Denise Brantley	436 Holmes Rd. Lake Placed FL 338	S) M Vqq
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record specifies a d The 90th day after ti			effective time, a	t 12:01 a.m. on t	the earlier
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	morning.	-/ DC			
	Signature of a	a member of authorize	representative of a mer	noci	

Page 3 of 3

Filing Fee: \$25.00