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EXAMINER

COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Gunn Property Services, LLC SUBJECT: 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: Jeremy Gunn Name of Person Gunn Property Services, LLC Firm/Company 304 Cooke St Address Leesburg, FL 34748 City/State and Zip Code karen@gunnpropertyservices.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 874-9904 Jeremy Gunn Name of Person Area Code & Daytime Telephone Number ഗ Enclosed is a check for the following amount: \$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gunn Property	Services, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Company	were filed on Sept	ember 8, 2008	_ and assigned
Florida document numberL08000085155			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company,"	the designation "LLC	or the abbreviation
Enter new principal offices address, if applicable:	2204 N Citrus Bl	vd Suite 9 Leesb	urg, FL
(Principal office address MUST BE A STREET ADDRESS)	34748		
		<u> </u>	_ ~~
		A A	E TI
Enter new mailing address, if applicable:			9
(Mailing address MAY BE A POST OFFICE BOX)		r#3 ~ <	- ,
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B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		records, enter the	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	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 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Address Type of Action Title** <u>Name</u> Karen J Gunn **MGRM** 304 Cooke St Leesburg, FL 34748 ☐ Add ✓ Remove Remove ☐ Add ☐ Remove Add Remove ∏Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Jeremy B Gunn

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00