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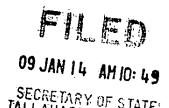
	Registration Section Division of Corporations					
SUBJEC	CT:	-IRST	SELECT (Name of Limi	PROPERTIES 61 ited Liability Company)	ROUP, LLC	
The enclo	osed Articles of	Amendment a	nd fee(s) are sub	mitted for filing.		
				to the following:		
			BRIAN	C. ROSENBLOOM (Name of Person)	·	
				(Firm/Company)		
			7632 M	(Address)	· · · · · · · · · · · · · · · · · · ·	
			JINDER	TRRE, FL 34786 (City/State and Zip Code)	<u></u>	
For furth	er information o		matter, please ca			
			-	at (407) 376-44	154	
(Name of Person)				(Area Code & Daytime T	elephone Number)	
Enclosed	is a check for the	he following ar	nount:			
\$25.00	0 Filing Fee	□\$30.00 Fi Certific	ling Fee & cate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327				STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building		

Tallahassee, FL 32314

Status of Advisors Control

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



FIRST SEL	ECT PROPERTIES GROUP, LLC
(Name of the Limited Lia (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liabi	lity Company were filed on 9/15/2008 and assigned
Florida document number <u>LO86000</u> 86	<u>6/27</u> .
This amendment is submitted to amend the followi	ng:
A. If amending name, enter the new name of the	e limited liability company here:
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	e:
(Principal office address MUST BE A STREET A	(DDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the new address here:
Name of New Registered Agent:	
New Registered Office Address:	
	(Enter Florida street address)
-	, Florida

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 Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager MGRM = Managing Member **Title** Name **Address Type of Action** MGRM JOHN GRIMALDI 604 MISSION LANE HOWEY IN THE HILLS, FL 34737 ☐ Add Remove 🗂 Add Remove ☐ Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member BRIAN C. ROSENBLOOM

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00