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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: 3131 S. Ridgewood, LLC Name of Edmitted Liability Company					
The enclosed Articles of Amendment and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Michelle Juras Name of Person					
3131 S. Ridgewad, LLC					
Address					
City/State and Zip Code Michelle Quarterly Of Deffy State. Com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Michelle Turas Name of Person at 384) 333-3400 Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$\ \times \text{S30.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \$\text{\$\t					

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

3\3\5°°C (Name of the Limited	Alability Compai Florida Limited L	ny as it now appears on our records.
The Articles of Organization for this Limited Life Florida document number <u>LO9000</u>	iability Company	
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	f the limited liab	ility company here:
The new name must be distinguishable and end wit "L.L.C."	th the words "Limi	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		3131 S. Ridgewood Ave. Unit #208 South Daytong, FL 32119
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Same as principal address
B. If amending the registered agent and/or the new registered of		fice address on our records, enter the name of the nev
Name of New Registered Agent:		in Garrett
New Registered Office Address:	3131 S	Ridgewood Ave. #208 Enter Florida street address
	South	Daytong, Florida 32119 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.

lf Changing Registered Agent, <u>Signature of New Registered Agen</u>

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' If amending or Managing	the Managers or Managing Members Member being added or removed from	on our records, <u>enter the title, name, and addres</u> n our records:	s of each Manager
MGR = Man MGRM = M	nager anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Gina Alvarez	3131 S. Ridgewood Ave# South Daytons, Fr 32119	\\\ _⊠ Add _□ Remove _
<u>Mbrm</u>	Ramara Garrett	3604 S. Atlantic Ave. Daytona Beach Shores, Fil. 30118	Add Remove
MGRM	Mariyn Garrett	3131 S. Ridgewood Ave #200 South Daytona Fr 32119	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	_
			-
	/		
Dated 5	Marilyn Mar	or authorized representative of a member	
	Marily Typed	or authorized representative of a member n faret- or printed name of signee	

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Filing Fee: \$25.00