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COVER LETTER

Tallahassee, FL 32314

TO: Registration Sc Division of Cor			
() # 1 fb	Estate Group LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Joshna Blaine Deason		
		Name of Person	
	Gulf Real Estate Group LL	C	
		Firm/Company	
	6990 Pine Forest Road		
		Address	
	Pensacola Fl. 32526		
	josh.deason@mygulfre.com E-mail address: (City/State and Zip Code to be used for future annual report noti	fication)
For further information c	oncerning this matter, please ca	all:	
Joshua Blaine Deason		850 944-3233	
Name o	d Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate 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		Street Address:	ution
Registration S Division of C		Registration Se Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gulf Real Estate Group LLC		
(Name of the Lim	ted Liability Company as it now app (A Florida Limited Liability Company	ears on our records.) ?)
The Articles of Organization for this Limited I		02/17/2010 and assigned
This amendment is submitted to amend the fol		
A. If amending name, <u>enter the new name o</u>	of the limited liability company	here:
The new name must be distinguishable and contain the	words "Limited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	24
(Principal office address MUST BE A STRE.	ET ADDRESS)	- 16
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE</u>	<u>BOX)</u>	SEE FLORID
 If amending the registered agent and/or agent and/or the new registered office addresses 		records, enter the name of the new registo
Name of New Registered Agent:	Joshua Blaine Deason	
New Registered Office Address:	6990 Pine Forest Road	
	Enter F	Torida street address
	Pensacola	, Florida ³²⁵²⁶
	Cuy	Zıp 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
Mgmr	Joshua Blaine Deason	6990 Pine Forest Rd. Pensacoa FL. 32526	= Add
			□Remove
			□Change
MGR	Linda D. Mitchell	6990 Pine Forest Rd. Pensacola FL, 32526	□Add
			■Remove
		<u> </u>	[] Change
			□Add
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Filing Fee: \$25.00