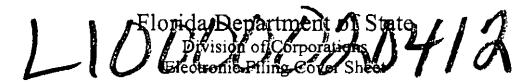
7/23/2018

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

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: (850)617-6383

From:

Account Name : BAND LAW GROUP, PL.

Account Number : 120090000020 Phone : (941)917-0505 Fax Number : (941)917-0506

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PHYLLIS REALTY MANAGEMENT, LLC
Certificate of Status

Certificate of Status

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Corporate Filing Menu

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(((H18000211871 3))):

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PHYLLIS REALTY MANAGEMEN	•	_	
(Name of the Limited	Liability Compa Florida Limited I	ny as il now appears on our lability Company)	records.)
The Articles of Organization for this Limited Lia Florida document number L10000020412	bility Company	were filed on 02/23/2010	and assigned
This amendment is submitted to amend the follow	wing:		•
A. If amending name, enter the new name of	the limited liab	ility company here:	166 <b>8</b>
The new name must be distinguishable and contain the wo	rds "Limited Liabil	lity Company," the designation	"LLC" or the abbieviation "L.L.C"
Enter new principal offices address, if applica	ble:	2893 Wynfair Drive	5 5 M
(Principal office address MUST BE A STREET	'ADDRESS]	Marietta, GA 30062	A CO
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B	<u>ox)</u>	2893 Wynfair Drive Marletta, GA 30082	DANGE 12
B. If amending the registered agent and/or registered agent and/or the new registered off	r registered of ice address her	ffice address on our re e:	cords, enter the name of the new
Name of New Registered Agent:	Gregory S. Ba	and, Esq.	
New Registered Office Address:	One South So	thool Avenue, Sulte 500	
<u> </u>		Enter Florida street	
	Sarasota		_, Florida <u>FL 34237</u>
		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 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

Page 1 of 3

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	Name	Address	Type of Action
			Remove
			☐ Change
			Add
			☐ Remove
			Remove Change
			100 E F
			Reffore
			OR Charge
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Gregory S. Band, Authorized Representative

Typed or printed name of signee

Signature of a member of authorized representative of a member

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Filing Fee: \$25.00