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S. HAWKES

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EXAMINER

COVER LETTER :OT. Registration Section **Division of Corporations** Scout Property Ventures, 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: Christopher G Bowers Jr Name of Person Scout Property Ventures, LLC Firm/Company 4601 W Paul Ave Address Tampa, FL 33611 City/State and Zip Code bowers0183@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (813) 468-9292 Area Code & Daytime Telephone Number Christopher G Bowers Jr Name of Person 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 Certificate of Status & Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Scout F	Property Ventures, LL	.C	6
(<u>Name of the Limited Liah</u> (A Flor	pility Company as it now appearida Limited Liability Company)	rs on our records.)	夏至
The Articles of Organization for this Limited Liabili	ty Company were filed on	May 10, 2010	and assigned
Florida document numberL10000050137	<u>, </u>		
This amendment is submitted to amend the following	g:		SS SA
A. If amending name, enter the new name of the	limited liability company he	<u>re</u> :	•
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Comp	any," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable	<u> </u>		
(Principal office address MUST BE A STREET AL	DDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	2 :		
			
B. If amending the registered agent and/or registered agent and/or the new registered office a	egistered office address on address here:	our records, enter	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Ei	nter Florida street add	lress
<u> </u>		, 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 Changing Registered Agent, Signature of New Registered Agent

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 <u>Title</u> **Name Address** Type of Action **MGRM** Christopher G Bowers Jr **✓** Add 4601 W Paul Ave Remove Tampa, FL 33611 Add Remove \Box Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated May 2019 2010 ignature of a member or authorized representative of a member Christopher G Bowers Jr Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00