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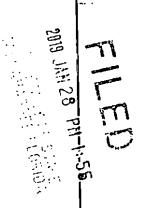
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COVER LETTER

TO: Registration Section Division of Corporations	>	
	T-NUISTMENTS	
The enclosed Articles of Amendment and feets) are so	ubmitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
LAUR.	16 BARHEH Name of Person	
SUNC	UNST Firm/Company	
	McGREBOR Blva	1 # 16
<u> </u>	J-LKS FL 3391 City/State and Zip Code	19
LBARHEH @ S E-mail address	SUNCOAST REC'hald!	ngs. com
For further information concerning this matter, please		
LAURIE BARHOH Name of Person	at (<u>2371</u>) <u>440 7</u> Area Code Daytime	2 7
Enclosed is a check for the following amount:		P 11
\$25.00 Filing Fee Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 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

(Name of the Limited Liability Compan (A Florida Limited L.	estments 11c	
A Florida Limited L.	is as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number 410000093065	were filed on <u>9-1-2010</u> and	d assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation	n "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	13031 Mebrebor 1 Fr Myers, Fr 33	3/14 #16 3919
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		
	BORAH & WOODS	28
New Registered Office Address: 1303	1 NUCRECOR Bluck # 16 Enter Florida street address	: A · · · · · ·
. EF	MULKS Florida 3	37/3
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

or removed MGR = M	from our records:		
	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	MARGARETENGLUND	13031 Mebricon Blud #	B Add
			□ Remove
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amenai	ng any other information, enter change(s) here: tAttach addit	tonta sneets, if neecssury.	
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		[五]	
	date, if other than the date of filing: $\frac{1-21-19}{}$	(optional)	
m effecti <u>ote:</u> If t	date, if other than the date of filing: we date is listed, the date must be specific and cannot be prior to date of filing or the date inserted in this block does not meet the applicable statutory fil s effective date on the Department of State's records.	more than 90 days after filing.) Pursuant to 605	i.0207 ed as i
recor The 90	d specifies a delayed effective date, but not an effective lith day after the record is filed.	e time, at 12:01 a.m. on the earlie	er of
ated	1-21-19		
	Signature of a member or authorized representati	ive of a member	
	TATE LEE Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00