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FILED 2015 JUL -8 P 12: 3 SECRETARY OF STATE

/JUL 0 9 YES

COVER LETTER

	Registration Sec Division of Corp				
SUBJEC	т: Е	Edwards Inves Name of Limi	Hncnts, LLC ted Liability Company		
The enclo	sed Articles of A	mendment and fee(s) are sub-	nitted for filing.		
Please ret	urn all correspon	dence concerning this matter t	to the following:		
		Jonath	An Krauser Name of Person		
		J. Edwar	ds <u>Investments</u> Firm/Company	, LLC	
		1980 Canter	bury Dr Address		
		Indialantin	City/State and Zip Code		
		JeKraus E-mail address: (t	City/State and Zip Code City/State and Zip Code Composition One of the Comp	cation) Z 20	
For furthe	er information co	ncerning this matter, please ca	ılı:		7
Jon	athan k Name of	Person	at (<u>321</u>) <u>626 -</u> Area Code Daytime	TARY OF STATE Telephone Number FLORID	
Enclosed	is a check for the	following amount:		0 & 8	
\$25.0	0 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:

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

J, Edwards R Iv (Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Comp	pany were filed on 12/08/2011 and assigned
Florida document number <u>L 11000137296</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1980 Canterbury Dr
(Principal office address MUST BE A STREET ADDRESS	5) Indialantic FL 32903
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1980 Canterbury Dr Indialantic FL 32903
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, <u>enter the name of the new</u>
a not new	
Name of New Registered Agent:	Jonathan Kraus (net new)
New Registered Office Address:	980 Canter bury DATE T
_ In	dialantic Florida 32903
New Registered Agent's Signature, if changing Registered Ag	rent: STA S. O
provisions of all statutes relative to the proper and comp	agree to act in this capacity. I further agreed o comply with the plete performance of my duties, and I am familiar with and t as provided for in Chapter 605, F.S. Or, if this document is ffice address, I hereby confirm that the limited liability

Page 1 of 3

Hanging 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 = MS $AMBR = AS$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
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auto is initial, tile t	this block does not m	eet the applicable				
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