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SECRETARY OF SATIONS DIVISION OF CORPORATIONS

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COVER LETTER

TO: Registration Se Division of Cor			
	Trust, LLC		
SUBJECT:	Name of Limi	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:	
	Benjamin Yonge		
		Name of Person	Daytime Telephone Number 230-3362 Daytime Telephone Number ee & S60.00 Filing Fee. Certificate of Status &
	Sand Lake Trust LLC		
		Firm/Company	
	2440 Sand Lake Rd		
		Address	
	Orlando, FL 32809		
	ben@equitypro.com	City/State and Zip Code	
		to be used for future annual report notifi	ication)
For further information c	concerning this matter, please co	all:	
Benjamin Yonge		at t	
Name (of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

Sand Lake Trust, LLC				
(<u>Name of the Limited Lial</u> (A Flor	pility Compa rida Limited	ny as it now appo Liability Company	ears on our records.)	
The Articles of Organization for this Limited Liability Florida document number 1,12000035590	Company	were filed on _	03/13/2012	and assigned
This amendment is submitted to amend the following:	 ·			
A. If amending name, enter the new name of the li	mited liab	oility company	<u>here</u> :	
The new name must be distinguishable and contain the words "L	imited Liabi	lity Company," the	e designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2440 Sand La	ike Rd.	36
(Principal office address MUST BE A STREET AD:	DRESS)	Orlando, FL.	32809	
				- PAR
Enter new mailing address, if applicable:		2440 Sand La	ike Rd.	PH L
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Orlando, FL	32809	TIONS TES
B. If amending the registered agent and/or registered agent and/or the new registered office and a Name of New Registered Agent:		<u>·e</u> :	on our records, <u>ente</u>	r the name of the nev
New Registered Office Address: 244	10 Sand Lak	ie Rd.		
new negligible office radicis.		Enter F	lorida street address	SECRETARY OF STATE DIVISION OF CORPORATIONS 18 JUL 1 PM 1: 59
Orl	ando		Florida _	32809
		Ciţv	,	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

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
MGR	Benjamin Yonge	2440 Sand Lake Rd., Orlando, FL E	
			□ Remove
			Change
MGR	Laura Hope Richards, Esq	151 Southhall Lane Suite 210	Add
			Remove
			Change
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Effective date, if if an effective date is Note: If the date document's effect	inserted in	this block	does not m	icet the a	pplicable	te of filing statutory	or more the	nan 90 day uirement	after tilin s, this dat	g.) Pursuan e will not	n to 605.0 be listed)207 (1 as t
ne record spec The 90th day	y after th	e record	is filed.			n effecti	ve time	, at 12:	01 a.m	. on the	earlie	r of:
Dated		7/3	<u>} </u>	/8	· .							
									· .			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00