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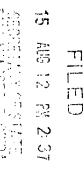
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AUG 13 2015 S. YOUNG

COVER LETTER

Divis	sion of Corp	orations		
SUBJECT:	RAYMON	ID M. DITIRRO LLC		
oobacer		Name of Lim	ited Liability Company	
The enclosed	Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return a	all correspon	dence concerning this matter	to the following:	
		RAYMOND M. DITIRRO)	
•			Name of Person	
			Firm/Company	
		1067 HOLLYHOCK WA	Y	
		THE VILLAGES, FL 32	163	ाक्ष जे
City/State and Zip Code				海流 甚 五
ray@TheSeaShores.com E-mail address: (to be used for future annual report notification)				
For further inf	ormation co	ncerning this matter, please co	•	
1 Of Turtiler IIII	ormanon co	neering ins matter, please c	aii.	71/0 FF
RAYMOND	M. DITIRRO)	352 430.5846 at ()_	57 0
•	Name of	Person	Area Code Daytime Telephone	Number
Enclosed is a	check for the	e following amount:		
□ \$25.00 Fil	ling Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	60.00 Filing Fee. Certificate of Status & Certified Copy additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

RAYMOND M. DITIRRO LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	nv as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Company	were filed on May 13, 2012	and assigned
Florida document number L12000071966		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
SANDY & RAY REALTY LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	SAME	
(Principal office address MUST BE A STREET ADDRESS)	#1-A-2	一つ名が
		三二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二
Enter new mailing address, if applicable:	SAME	AS NIT
(Mailing address MAY BE A POST OFFICE BOX)		
····		
		1 / 1 (1) (1)
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our records, <u>e</u> :	enter the name of the n
Name of New Registered Agent:		_
New Registered Office Address:		
	Enter Florida street address	
	, Flor	
	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

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>	<u>Address</u>	Type of Action
MGRM	SANDY J. DITIRRO	1067 HOLLYHOCK WAY THE V	Add
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	e, if other than the ate is listed, the date mus	date of filing	cannot be prior to	date of filing or n	ore than 90 days at	otional) fter filing.) Pursuan	t to 605.020°
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