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2014 OCT 27 PM 3: 45

K.SALY EXAMINER OCT 30 2014

COVER LETTER

TO:	Registration Sec Division of Corp					
CHD IE	Raise Re	al Estate, LLC				
SUBJEC	-1:	Name of Lim	ited Liability Company			
The encl	losed Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Please re	eturn all correspor	ndence concerning this matter	to the following:			
		Attn: Lars Heldre C/	O SuperiorFloridaRealty.co	m, Inc		
			Name of Person			
		Raise Real Estate, L				
			Firm/Company			
	877 East Palmetto Park Road					
			Address			
		Boca Raton, FL 334	32			
		lars@superiorflorida.	City/State and Zip Code			
		E-mail address: (1	to be used for future annual report notifi	cation)		
For furth	ner information co	oncerning this matter, please ca	all:			
Lars F	łeldre		561 300-3001			
	Name of	Person	at () Area Code Daytime	Telephone Number		
Enclosed	d is a check for the	e following amount:				
\$25.	00 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

FILED 2014 OCT 27 PH 3: 45

Raise Real Estate, LLC (Name of the Limited Liability Company as it now appears on our records:
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 11/09/2012 Florida document number _L12000142435 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records: FILED MGR = Manager AMBR = Authorized Member 2014 OCT 27 PH 3: 45 Type of Action Title Address Name MGR + Inger Ellen Nicolaisen <u>51</u> 877 E. Palmetto Pk. Rd., Boca Raton, FL Remove Inger Ellen Sandaker

MGR + Nicolaigen 877 877 E. Palmetto Pk. Rd., Boca Raton, Ft ___ ■ Add ☐ Remove ☐ Remove □ Add ☐ Remove ☐ Add ☐ Remove □ Add ☐ Remove

vve are only amending tr	ne name of the Authorized Memi	oer
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te this document is filed by the Florid	a Department of State)	(optional) be more than 90 days after
October 22	a Department of State) 2014	
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