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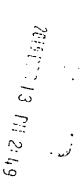
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R. WHITE JAN 1 5 2020

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Divi	ision of Corp	porations	. ,		
Q	Florida Perr	nit & Lien Search, LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspon	ndence concerning this matter	to the following:		
		Lill Denham			
			Name of Person		
		Florida Permit & Lien Sea	rch, LLC		
Firm/Company					
3384 Magic Oak Lane					
Address					
		Sarasota, FL 34232			
			City/State and Zip Code		
		E-mail address: (to be used for future annual report not	ification)	
For further in	nformation co	oncerning this matter, please co	all;		
Lill Denham			941 954-8881		
	Name of	f Person	at () Area Code Daytin	ne Telephone Number	
Enclosed is a	check for th	ne following amount:			
■ \$25.00 F	Filing Fee	S30.00 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)	
	iling Addres		Street Address: Registration So	ection	
	gistration S vision of C	orporations	Division of Co		
). Box 632		The Centre of		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FLORIDA PERMIT & LIEN SEAERCH, LLC

2019[3] 13 PH 2:49 (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 November 14, 2012 and assigned Florida document number _____12000143960 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RINEHART - ROBBINS, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Lill Denham Enter new principal offices address, if applicable: 3384 Magic Oak Lane (Principal office address MUST BE A STREET ADDRESS) Sarasota, FL 34232 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:

Enter Florida street address		
City	, Florida 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
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				Remove
				□Change
				□Add
				Remove
				☐ Change
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ffective date, if other the an effective date is listed, the lote: If the date inserted in ocument's effective date of	n this block does not i	meet the applicable	ate of filing or more th statutory filing req	(optional) an 90 days after filing uirements, this date	.) Pursuant to 605.0207 : will not be listed as
record specifies a delayed I is filed.	effective date, but no	t an effective time,	at 12:01 a.m. on the	e carlier of: (b) T	he 90th day after the
D 1 0		2010			
ated December 9					
(/	(,	/	d representative of a r		

Filing Fee: \$25.00

Typed or printed name of signee