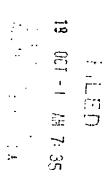
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Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corpora				
SUBJE	CT: <u>Level</u>	Headld Prop- Name of Limit	ed Liability Company		
The enc	closed Articles of Ame	endment and fee(s) are subm	nitted for filing.		
Please r	eturn all corresponder	nce concerning this matter to	o the following:		
	-	Ameli	A TAYINGY Name of Person		
	-	Level Head	Firm/Company	SLLC	
	-	901 N	W 8th AVE S Address	TEAL	<u> </u>
	-	Crainesvi	City/State and Zip Code	21	
	-	E-mail address: (to	be used for future annual rep	propertication)	MGJ. 2
For furt	ther information conce	rning this matter, please cal	11:		
	AMILA Name of Per	Tanver	at (<u>362</u>) <u>3</u> Area Code	Daytime Telepho	ne Number
Enclose	ed is a check for the fo	llowing amount:			
d \$25	5.00 Filing Fee C	330.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose		\$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

Level Headed Proper	ties LLC.	6
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	iv as it now appears on our records. iability Company)	7 8
The Articles of Organization for this Limited Liability Company v	were filed on	and assigned
Florida document number		-ب <u>ب</u>
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) ticles of Organization for this Limited Liability Company were filed on	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	901 NW 8th+	Ave STEAU
(Principal office address MUST BE A STREET ADDRESS)	Gainesville Fl	
	32601	
Enter new mailing address, if applicable:	901 NW 8th	AVE STE ALC
(Mailing address MAY BE A POST OFFICE BOX)	<u>Coinesville</u>	1 32601
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Flor	-ida
	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>	Address	Type of Action
MGR	Smith, Justin J	8117 Bellingham Circle	
		8117 Bellingham Circle Baleigh, NC 27615	
			Change
			Add
			□ Remove
			Change
			Add
			Remove
			Change
			Add ين كلية المسلمة الم
			Change
			□ Remove
			Change
			Add
			Remove
			Change

te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed nument's effective date on the Department of State's records.	·		
ective date, if other than the date of filing:	•		
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te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ument's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier he 90th day after the record is filed.			\$25 27 171
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ument's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier he 90th day after the record is filed.	effective date is listed	, the date must be specific and cannot be prior to	o date of filing or more than 90 days after filing.) Pursuant to 605.0
he 90th day after the record is filed.			statutory fitting requirements, this date will not be fisted
he 90th day after the record is filed.			
ed			an effective time, at 12:01 a.m. on the earlier
	he 90th day afti	er the record is filed.	
Signature of a member or authorized representative of a member	ed		_·
Signature of a member or authorized representative of a member		DATE:	
	-	Signature of a member or authori	ized representative of a member

Page 3 of 3

Filing Fee: \$25.00