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| Special Instructions to Filing Officer: |
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COVER LETTER

| Division of Co | orporations | | |
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| Whitecas SUBJECT: | tle Property Management LLC | | |
| SUBJECT: | Name of Lim | ited Liability Company | |
| Thomas I and Astinhard | of American and Covery with | anise of the original | |
| The enclosed Afficies (| of Amendment and fee(s) are sub | inaco as mag. | |
| Please return all corres | pondence concerning this matter | to the following: | |
| | Roberto Blanco | | |
| | | Name of Person | |
| | Whiteeastle Property Mana | agement, LLC | |
| | | Firm Company | |
| | P.O. Box 4548 | | |
| | | Address | |
| | Hialeah, Fl 33014 | | |
| | | City/State and Zip Code | |
| | rita@franklinlaw.com | | |
| | E-mail address: (| to be used for future annual report noti | fication) |
| For further information | concerning this matter, please ca | all: | |
| Roberto Blanco | | 305 606-0388 | |
| Name | of Person | at () Area Code Daytim | e Telephone Number |
| | | | |
| Enclosed is a check for | the following amount: | | |
| □ \$25.00 Filing Fee | ■ \$30.00 Fifing 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:

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

Whitecastle Property Management, 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 09/11/2013 and assigned Florida document number _______13000128146 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: Name of New Registered Agent: 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 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 |
|--------------|--|--|----------------|
| AMBR | Pino, Mario, Trustee | 3 Circle Drive, Hialeah, Fl 33010 | Add |
| | | | Remove |
| | | | Change |
| AMBR | Roberto Blanco, Trustee of thee Blanco Family Trust dated | 18590 NW 67 Ave, # 200-A, Hialeah, Fl 33010 | Add |
| | | | Remove |
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| E. Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this I document's effective date on the I | ust be specific and cannot be prior to block does not meet the applicab | date of filing or more than 90 days after tiling.) I de statutory filing requirements, this date w | Pursuant to 605.0207 (3) ill not be listed as the |
| f the record specifies a delayed b) The 90th day after the re | | an effective time, at 12:01 a.m. o | n the earlier of: |
| Dated August 15 | 2019 | _• | |
| | : 0 | | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00