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J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Crescent Hills Rental, LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filling.	
Please return all correspondence concerning this matter to the following:	
Danny Manausa Name of Person	
Manausa Law Firm, P.A. Firm/Company	
1701 Hermitage Blud. Suite 100	
Tallahassee, FL 32308 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (850) 597-7616 Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\sim \text{S25.00 Filing Fee & Certificate of Status}\$\$ \$\sim \text{S55.00 Filing Fee & Certificate of Status}\$\$\$ \$\sim S60.00 Filing Fee & Certificate of Status & Certifica	I

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

Crescent Hills Renta	il, LLC
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document numberL\3000\3399\	were filed onO9]23 2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4708 Capital Circle NWE
(Principal office address MUST BE A STREET ADDRESS)	Tallahrssee, FL 32303 5
Enter new mailing address, if applicable:	4708 aptal Cide, No
(Mailing address MAY BE A POST OFFICE BOX)	Tallahassee, FL 32303
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on our records, enter the name of the new:
Name of New Registered Agent:	aniel E. Manausa
New Registered Office Address:	701 Hermitage Blud. Suite 100 Enter Florida street address
Tall	City Sce , Florida 32308 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
Muthorized Representative	James Durant, JR.	1407 Piedmont Drive East	🗆 Add
		Tallahassa, FL 32308	Remove
Authorized			Change
Representative	Behzad Ghazvini	4708 Capital Circle, NW	J_ □ Add
		Tallahasse, FL 32303	□ Remove
			Change
			🗆 Add
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Filing Fee: \$25.00