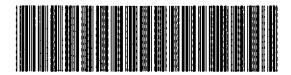
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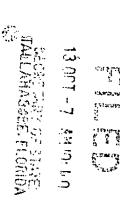
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COVER LETTER

TO: Registration Section Division of Corporations

EAW Properties, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert O. Beasley

Name of Person

Litvak Beasley & Wilson

Firm/Company

226 East Government Street

Address

Pensacola, FL 32502

City/State and Zip Code

julia@lawpensacola.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julia A. Whitson

{...}850.432-9818

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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 Tallahassec, 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

EAW Properties, LLC	······	
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears of Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Florida document number L13000139001	Company were filed on Octo	ber 2, 2013 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	nited liability company here:	
EWA Properties, LLC		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company,	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		6.34
(Principal office address MUST BE A STREET ADE	ORESS)	<u> </u>
		Constitution of the consti
Enter new mailing address, if applicable:		The state of the s
(Mailing address MAY BE A POST OFFICE BOX)		Trible To Control
		202
		A
B. If amending the registered agent and/or registered agent and/or the new registered office ad		records, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter	Florida street address
		, Florida
	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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager, or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member <u>Address</u> Type of Action <u>Title</u> <u>Name</u> Add Remove Remove Add Remove Remove Remove

D. If amending a	ny other information, enter change(s) here: (Attach additional sheets, if necessary.)
., " - 7:=	
Dated Octob	er 3, 2013
Ro	Signature of a member or authorized representative of a member obert O. Beastey
- 10	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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