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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporation	ns	*	••	
SUBJECT: GRAND	MANAgem	ent LLC		
SUBJECT: GRAND MANAGEMENT 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: Tames T. Collis Name of Person Firm/Company T Sandp.pen C+ Address Palm Coast Address City/State and Zip Code Scoce & Grand Haven Adm Coast Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sandras Cole Name of Person at (396) Area Code Daytime Telephone Number				
The enclosed Articles of Amenda	nent and fee(s) are subr	nitted for filing.		
Please return all correspondence of	concerning this matter t	to the following:		
	JAME	Name of Person	<u>3</u>	-
		, value of the con-		
		Firm/Company		
	7 SAN	&pipen Ct		-
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	Palm (EAST FC	32137	
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 	SCOLEE &	D Greand Haven	PALM COAST-CO	m
			port nourceation)	
For further information concerning	•			
Starling Cole	É	at (386) 49	77-0800	
Name of Person		Area Code	Daytime Telephone Number	
Enclosed is a check for the follow	ing amount:			
	0.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	sed) Certified	te of Status &

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**

GRAND MANAGE	ment LLC	
(<u>Name of the Limited Limbility</u> (A Florida I	Company as it now appears on o limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Co	mpany were filed on	/17 /2013 and assigned
Florida document number 4 13000173 695		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
GRAND REALTY OF FLORE The new name must be distinguishable and contain the words "Limite	ida LLC	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		ASE TO
(Principal office address MUST BE A STREET ADDRE	ESS)	CR SU
		SA ST
		me a m
Enter new mailing address, if applicable:		EEQ. PEO
(Mailing address MAY BE A POST OFFICE BOX)		TATE OR
		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office addresses		records, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida str	reet 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 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Add
			☐ Remove
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ICCLIVE	ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after he date inserted in this block does not meet the applicable statutory filing requirements, this	filing.) Pursuant to 605.0 date will not be listed	0207 d.as
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