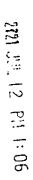
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(Requestor's Name)
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COVER LETTER

TO: Regis Divis	stration Section ion of Corporations
SUBJECT: _	Durshy Development LCC Name of Linsted Liability Company
The enclosed A	Articles of Amendment and fee(s) are submitted for filing.
Please return a	Il correspondence concerning this matter to the following:
	Molly Dunchy Name of Person
	Dauphy Properties
	21760 50 54 # 102
	Lutr 72 33549 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further info	rmation concerning this matter, please call:
M	Name of Person at (813) 283 255 8 Area Code Daytime Telephone Number
Enclosed is a ch	neck for the following amount:
\$ \$25.00 Fili	ng Fee

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Company as it now appears on our records.) (A Florid Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on 1-27-2014 and assigned Florida document number 140000 16964
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 "LLC."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
100 100
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
22
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere
agent and/or the new registered office address here:
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:

N

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. Thereby 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 Title Name Address Type of Action MGR _ □Change Jim Dunphy - change ress address to this. Lur H □Remove ---□Chânge _ □Remove □ Change Remove _____ □Change □Remove

_____ □Change

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an effective date is f lote: If the date in	other than the date listed, the date must be s ascreed in this block of the date on the Depart	specific and cam does not meet	iot be prior to d the applicable	1.20. late of filing or n e statutory filin	ore than 90 days	optional) after filing.) Purs . this date will	suant to 605,020 not be listed a
record specifies a is filed.	delayed effective dat	e, but not an e	Ifective time.	. at 12:01 a.m.	on the earlier o	f: (b) The 90t	h day after the
	7.6		2021				
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ated		سالاً	Duy	ed representative			

Filing Fee: \$25.00