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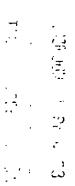
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COVER LETTER

Registration Section 1: **Division of Corporations** Silky Straight Entreprises LLC JBJECT: Name of Limited Liability Company he enclosed Articles of Amendment and fee(s) are submitted for filing. lease return all correspondence concerning this matter to the following: Jerlysha Williams Name of Person Done In Days Real Estate Solutions LLC Firm/Company 11501 Laguna Court Address Jacksonville, Florida 32218 City/State and Zip Code doneindays@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jerlysha Williams 5915298 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$25.00 Filing Fee □ \$30.00 Filing Fee & **\$55.00** Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) **Mailing Address:** Street Address:

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

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

Silky Straight Entreprises LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on March 17, 2014	and assigned
lorida document number L14000043764		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
Oone In Days Real Estate Solutions LLC		
he new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
nter new principal offices address, if applicable:		
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Principal office address MUST BE A STREET ADDRESS	<u> </u>	* 21
	 : - : - : - : - : - : - : - :	;
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nter new mailing address, if applicable:		-
Mailing address MAY BE A POST OFFICE BOX)	÷ ,	
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	y.	·
 If amending the registered agent and/or registered off gent and/or the new registered office address here: 	ice address on our records, enter the nam	e of the new regis
general and the new registered office address nere.		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Fiorida 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 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.

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

GR =	Manager	
MBR =	Authorized	Member

<u>itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			□Remove
			□ Change
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