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S. PRATHER

COVER LETTER

то:	Registration Section Division of Corporations
SUBJE	31-0 Pacton of Tamora 1-60
The encl	losed Articles of Amendment and fee(s) are submitted for filing.
Please re	Say No Day My Hay #300 Address Carly Bate and Zip Code Carly Bate and Zip Code Carly Bate 32 Long Carly Bate and Zip Code Carly Bate 34 Long Carly Bate and Zip Code
For furth	ar information concerning this matter, please call: ar Lym New at (813) 508 2715
. 1	d is a check for the following amount: .00 Filing Fee \$\Bigsquare \$\\$30.00 \text{Filing Fee & }\Bigsquare \$\\$55.00 \text{Filing Fee & }\Bigsquare \$\\$60.00 \text{Filing Fee.} \text{Certified Copy }\text{Certified Copy }\text{(additional copy is enclosed)} \text{Certified Copy }\text{(additional copy is enclosed)}
linclosed	Address Address Address Address City State and Zip Code Cally 3 Line Har Tawpa, Lam E-mail address: (to be used for future annual report notification) Deer information concerning this matter, please call: at (83 508 2715) Name of Person at (83 508 2715) Area Code Daytime Telephone Number d is a check for the following amount: Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy Certified Copy

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

360 Realty of Tampa, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited	d Liability Company)	
The Articles of Organization for this Limited Liability Companies L1400005785	ny were filed on 4/8/14	and assigned
This amendment is submitted to amend the following:		T. VE
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter the na</u>	me of the new registered
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 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 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>	Name	Address	Type of Action
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