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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Magnolia Real Estate 1, 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:

Michael Oliver

Name of Person

Maynolia Real Estate 1, UC

Firm/Company

558 West New England Ave. Suite 250

Address

Winter Park, FL 32789

City/State and Zip Code

michael.oliver@magnoliaadvisors.com

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

For further information concerning this matter, please call:

Michael Oliver	321, 229-5136	
Name of Person	Area Code Daytime Telephone Number	

Enclosed is a check for the following amount:

\$25.00 Filing Fee \$\square\$ \$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 radditional copy is enclosed)

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

iviagnolia Real Estate 1, LL		**	
(Name of the Limite	d Liability Company as A Florida Limited Liabilii	it now appears on our records.) ty Company)	EC: 80.
The Articles of Organization for this Limited Lia Florida document number L14000146619	·	filed on <u>9/18/2014</u>	DL 20 AH 10: 43 AHAMSTE. FLORID
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability o	company here:	בר ב
The new name must be distinguishable and contain the wo	ords "Limited Liability Co	ompany," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	(ADDRESS)		
	_		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE E	<u> </u>		
B. If amending the registered agent and/orthe new registered off		address on our records, en	ter the name of the new
Name of New Registered Agent:	Magnolia Advis	ors, LLC	
New Registered Office Address:	558 West New	England Ave. Suite 250	
- The state of the	-	Enter Florida street address	
	Winter Park	. Florid:	32789
		City	Zip Code
New Registered Agent's Signature, if changing R	egistered 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Rainer Richter	558 West New England A	. <mark>V</mark> □ Add
		#250	Remove
		Winter Park, FL 32789	Change
MGR	Brian Cirillo	558 West New England A	.V □ Add
		#250	Remove
		Winter Park, FL 32789	Change
· 			Add
			□ Remove
			□ Change
			□ Add
			Remove
			Change
			Remove
			Change
			□ Remove
			Change

ve date, if other than the date of filing:	3413
	of
90th day after the record is filed.	
Tilly 76 1 2018	
<u> 3017 20 J. 2018</u>	
MAD Laise	
Signature of a member or authorized representative of a member	
\ \	
	ive date, if other than the date of filing: (optional) (optional) (crive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records. cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed. Tory 26 1. 2018 While the procedure of a member of authorized representative of a member.

Page 3 of 3

Filing Fee: \$25.00