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COVER LETTER

SUBJECT:	PALM REAL		
	Name of Line	ited Liability Company	
Division of Corporations PALM REALLY HOMES, LLC Name of Limited Liability Company the enclosed Articles of Amendment and feets) are submitted for titing, the enclosed Articles of Amendment and feets) are submitted for titing. He enclosed Articles of Amendment and feets) are submitted for titing. He enclosed Articles of Amendment and feets) are submitted for titing. He had been company He had been been by the following amount: He had been been confident and the following amount: He had been company Area Code Daytime Telephone Number Inclosed is a check for the following amount:			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for tiling.	
Please return all correspo	ondence concerning this matter	to the following:	
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		Count of Chapti	
	PALM	REALTY HOMES, L	LC
		, -	
	657	SPRING LAKE	DR
		Address	
	MELBOU	eNE,FL 32940	
	Ryon (il) C	City/State and Zip Code ROMEDIAOWE ROUM	
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	all:	
Ryan	MAYER	407, 718	-6413
Name (of Person	Area Code Daytime	: Telephone Number
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\$25.00 Filing Fee	☐ \$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 (additional 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 ARTICLES OF ORGANIZATION **OF**

TO	
ARTICLES OF OR	RGANIZATION FILE
OF	2017 110
Name of the Limited Liability Company (A Florida Limited Lia	billity Company)
The Articles of Organization for this Limited Liability Company w Torida document number 414000147315	ere filed on $\frac{9/19/2014}{2014}$ and assigned
This amendment is submitted to amend the following:	
a. If amending name, enter the new name of the limited liability	ty company here:
he 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)	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)	657 SPRING LAKE DR MELBURNE, FL 32940
3. If amending the registered agent and/or registered offic egistered agent and/or the new registered office address here:	ce address on our records, enter the name of the new
Name of New Registered Agent:	IAN MAYER
New Registered Office Address: 65	7 SPRING LAKE DR Enter Florida street address
MELBOUR	$\frac{2940}{\text{City}}$. Florida $\frac{32940}{\text{Zip Code}}$
	City Zap Code
ew Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent and agree rovisions of all statutes relative to the proper and complete peccept the obligations of my position as registered agent as proving filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	rformance of my duties, and I am familiar with and wided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agunt Signature of New Registered Agent

Page 1 of 3

	Authorized Person(s) authorized to m rom our records:	nanage, <u>enter the title, name, and address of each person_being added</u>
MGR = Ma	mager nthorized Member	i i
Title	<u>Name</u>	Address Type of Action
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		INDIALANTIC FL 32903 Exemove
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Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	must be specific a s block does not	and cannot be prior to t meet the applica	o date of tiling or mo	(option of the control of the contro	filing.) Pursuant to 6	605,0207 (isted as th
the record specifies a dela) The 90th day after the	yed effective record is filed	date, but not d.	an effective tir	me, at 12:01 a	i.m. on the ear	rlier of:
Dated AUGUST	2	2017	_ •			
	A.	(Mr.	ized representative of			

Page 3 of 3

Filing Fee: \$25.00