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SECRETARY OF STATE

K. SALY JUL - 3 7217

COVER LETTER

Division of Co			
SUBJECT:	D Asset 3 a	22 C	
SCB0201	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	Brandon Crawford		
		Name of Person	
	N/A		
		Firm/Company	
	4060 PGA Blvd Sui	ite 120-A	
		Address	······································
	Palm beach Gardens F	7 33410	
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	Brandon@paradiserealestat		
	E-mail address: (to be used for future annual report notifi	ication)
For further information co	oncerning this matter, please ca	all:	
Brandon Crawford		561 389-7281	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$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 TO ARTICLES OF ORGANIZATION

FILED

	OF	2017 JUN 22	- (
RD ASSET 3 L (Name of the Limited Liability Comp. (A Florida Limited	Any as It now appears on our records. (Liability Company)	2017 JUN 29 SECRETARY OF IALLAHASSEE.	PM 3: FSTATE
The Articles of Organization for this Limited Liability Compan Florida document number <u>4/4000/9/6/4</u> .	y were filed on 12-16-14	and assigned	d
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or t	he abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	4060 PGA Blud S Palm Beach Garde	vite 120-1	9
(Principal office address MUST BE A STREET ADDRESS)	raim beach varde	15 FZ 539	10
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	YOLO PGA Blud. Palm Beach Van	svite 120-1 dens Fz 33º	<u>9</u>
	<u></u>		

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

4060 PGA Blud Suite 120-A

Enter Florida street address

Palm Beach Candras, Florida 33410

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 add		person being added		
or removed from our records: MGR = Manager AMBR = Authorized Member		Address SEURETARY OF STATE		
<u>Title</u>	Name	Address SECRETARY PH 3: 3	/ Type of Action	
		Address SECRETARY OF STATE ALLAHASSEE, FLORID:	Add	
			□ Remove	
			☐ Change	
<u> 196 R</u>	Supiter Rentals LCC	4060 PCA Bludsuite 120 Palm Beach Gardens	<u>~A</u> □ Add	
		Palm Beach Gardens	□ Remove	
		FZ 33410	Change	
				
			□ Remove	
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	ALLAHASSTOFSIA
	· SCE, FLOR
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ective (date, if other than the date of filing: (optional)
te: If th	re 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 605.02 are date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
cument'	s effective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
ne 90	th day after the record is filed.
	7 3/ 5 5
ted	June 26, 2017.
	Signature of a member or authorized representative of a member
	dignature of a member of audiorized representative of a member
	Brandon Crawfer Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00