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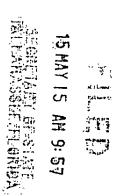
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| Special Instructions t | o Filing Officer: | |
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COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

| TO: Registration Section Division of Corporations | | | | | | |
|---|--|--|--|--|--|--|
| SUBJECT: Professional Real Estate Investment, 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: | | | | | | |
| RAFACI M- CEBALLOS Name of Person | | | | | | |
| PROFESSIONAL Real ESTAYE TWESTMENT LLC Firm/Company | | | | | | |
| 1650 West SAULAKE 18 Ste 235 Address | | | | | | |
| Olwodo F1, 32 City/State and Zip Code | | | | | | |
| E-mail address: (to be used for future annual report notification) | | | | | | |
| For further information concerning this matter, please call: | | | | | | |
| PARACI M. Ceballos at 305 (608-2067 Name of Person Area Code Daytime Telephone Number | | | | | | |
| Enclosed is a check for the following amount: | | | | | | |
| \$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) | | | | | | |
| MAILING ADDRESS: Registration Section Division of Corporations STREET/COURIER ADDRESS: Registration Section Division of Corporations | | | | | | |

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| PROFESSIONAL Real ESTATE | INVESTMENT L | LC | |
|--|--|-----------------|--------------|
| (Name of the Limited Liability Company (A Florida Limited Lia | as it now appears on our records.) bility Company) | | |
| The Articles of Organization for this Limited Liability Company w Florida document number <u>L15000057035</u> . | ere filed on $\frac{4-10-15}{2}$ | and a | ssigned |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited liability | ty company here: | | |
| The new name must be distinguishable and contain the words "Limited Liability | Company," the designation "LLC" or the | abbreviation ' | L.L.C." |
| Enter new principal offices address, if applicable: | - <u> </u> | · | |
| (Principal office address MUST BE A STREET ADDRESS) | <u> </u> | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | |
| B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: | ce address on our records, <u>ente</u> | the nam | e of the new |
| Name of New Registered Agent: | | 90 2 | Brailing. |
| New Registered Office Address: | P. P. L. L. | 图式 | 1 |
| | Enter Florida street address | 1 2 2 | 0 |
| | City , Florida | Zup Co | 3 |
| Now Desistand Assetts Cignoture if shanging Desistand Agents | | , List | |

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 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> | Name | Address | Type of Action |
|--------------|--------------------|---|----------------|
| MANAGER | RAFACI M. Cessilos | 1650 Sunlave Lo Ste 235 Orhando, FL. 32809 | Add |
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| | fl port | des | | | | | N. Li | - |
| • | 7/10 | Signature of a | a member or au | horized represent | ative of a member | · ——— | | |
| |) ^ | | | | | | | |

Page 3 of 3

Filing Fee: \$25.00