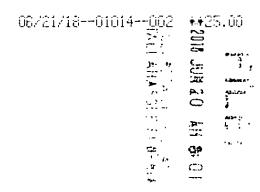
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J. HARRIE

COVER LETTER:

TO: Registration Section Division of Corporation	ons	
SUBJECT: <u>RANDY</u>	BRADSHAW PROPERTIES, LLC Name of Limited Liability Company	
The enclosed Articles of Amend	lment and fee(s) are submitted for filing.	
Please return all correspondence	concerning this matter to the following:	
	SANDRA BRADSHAW Name of Person	
	PANDY BRADIHAW PROPERTIES, LLC	
	19431 NE 17th PLACE	
_	WILLISTON, F-L 32696 City/State and Zip Code	
	SBRAD SHAW 1256 GMAIL. COM E-mail address: (to be used for future annual report notification)	
For further information concern	ing this matter, please call:	
SANDRA /	at (352) 441-0/26 Area Code Daytime Telephone Number	
Enclosed is a check for the following	owing amount:	
	\$30.00 Filing Fee & \$\sum \\$55.00 Filing Fee & \$\sum \\$60.00 Filing Fee. Certificate of Status \$\sum \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{(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 OF

The Articles of Organization for this Limited Liability Company were filed on April 23, 2015 and assigned Florida document number <u>L 15000071826</u>. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The 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: 19431 NE 17th PLACE WILLISTON FL 32696 (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 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: 19431 NE 17-Zl PLACE

Enter Florida street address

W1 U1STON Florida 32696

City Zip Code New Registered Office Address:

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 is 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 SANDRA BRADSHAW WILLISTON TO PLACE Type of Action Title ■Add AMBR □ Remove ☐ Change ☐ Remove Change □ Add _□ Remove ☐ Change _□ Add ☐ Remove ☐ Change لباتي 🗖 🗖 ST. _□ K€movel Ghange □ Add ☐ Remove _□ Change

, lf an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
(If an Not doc	effective date, if other than the date of filing: effective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ament's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies the 90th day after the record is filed.	u as n
Dat	ed June 18 2018 Plant Blue 5 Signature of a member or authorized representative of a member 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
	Signature of a member or authorized representative of a member	****
	RANDY K. BRADSHAW Typed or printed name of signee	
		F-
	Page 3 of 3	
	Page 3 of 3	

Filing Fee: \$25.00