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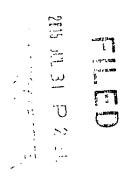
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PICK-UP	☐ WAIT	MAIL.
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COVER LETTER

Division of Co			
YTG Real	ty LLC		
		ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Garry Graham		
,		Name of Person	
	YTG Realty LLC		
		Firm/Company	<u> </u>
	411 Walnut Street, #7165		
		Address	
	Green Cove Springs, FL 32	2043	
		City/State and Zip Code	
	YandGRealEstate@gmail.c		
	E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please ca	all:	
Garry Graham		808 447-0560 at ()	
Name	of Person	Area Code Daytim	e Telephone Number
•			
Enclosed is a check for t	the 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 **OF**

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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	YTG Realty LLC				
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 "L.L.C." Enter new principal offices address, if applicable: (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 neregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street oddress	(Name of the Limited	d Liability Company A Florida Limited Lia	y as it now appears on ou ability Company)	ır records.)	
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: (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 neregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address [Enter Florida street address Zip Code]	The Articles of Organization for this Limited Liab	bility Company w	vere filed on May 5, 2	015	and assigned
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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailling 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 neregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City Zip Code	Florida document number L15000079015	····································			
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New Registered Office Address: Enter Florida street address , Florida City Zip Code			ce address on our	records, enter tl	ne name of the ne
Enter Florida street address	Name of New Registered Agent:				····
, Florida	New Registered Office Address:		Free Florida at		
City Zip Code			Enier riorida sire	et aaaress	
		 	City	, Florida	Zip Code
	New Registered Agent's Signature, if changing Re	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

U

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>	Address	Type of Action
AMBR	. Garry Graham	411 Walnut Street #7165	■ Add
		Green Cove Springs, FL 32043	□ Remove
			Change
AMBR	y & G Real Estate, LLC	411 Walnut Street #7165	_□ Add
		Green Cove Springs, FL 32043	☐ Remove
			■ Change
MGR	, Makiko Osawa	2100 Date Street, Apt 2506	Add
		Honolulu, HI 96826	□ Remove
			□ Change
MGR	MGR Austin Hooper	2550 Notinham St	= Add
		Titusville, FL 32796	☐ Remove
			Change
AMBR	Robin Hardbarger	411 Walnut Street, #7165	B Add
		Green Cove Springs, FL 32043	☐ Remove
	-Robin-Hardbarger-		□ Change
			□ Add
			Add
			□ Change

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	07/24/2015
	date, if other than the date of filing: (optional)
Effective	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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Page 3 of 3

Filing Fee: \$25.00