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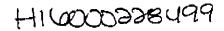
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LIMITLESS REALTY, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LIMITLESS REALTY, LLC		•			
(Name of the Limit	ed Liability Comp (A Florida Limited	any as it now appears on our re Liability Company)	cords.)		
The Articles of Organization for this Limited Li Florida document number L15000082492 This amendment is submitted to amend the following the submitted to amend the following the submitted to amend the following the submitted to amend the submitted the	•	were filed on May 11, 201	5 and ass	igned	
A. If amending name, enter the new name of	-	oility company here:			
The new name must be distinguishable and contain the w	ords "Limited Linb	llity Company," the designation	"LLC" or the abbreviation "L.	LC"	
Enter new principal offices address, if applica	able:		ĀS	<u></u>	
(Principal office address MUST BE A STREE			デ (C) タス	SH T	
		AAAA Yorkusta aa Taraa	<u>a</u> :		
Enter new mailing address, if applicable:		2444 Winchester Lane	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)		St Augustine, Florida 3209		-5:	
B. If amending the registered agent and/ registered agent and/or the new registered of Name of New Registered Agent:		<u>e</u> :	ords, enter the name	of the new	
New Registered Office Address:	2444 Winchest	er Lanc			
	Enter Florida street address				
	St Augustine		, Florida ³²⁰⁹²		
New Registered Agent's Signature, if changing R		City	Zip Code		
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing the c	i agent and agr er and complete tered agent as p egistered office change.	ee to act in this capacity. performance of my duties provided for in Chapter 6	, and I am familiar with 05, F.S. Or, if this document that the limited liability	r and ment is	

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 Title Name Address. Type of Action MGR Glann W Williams 2444 Winchester Lane ₩ Add St Augustine, Florida 32092 □ Remove Change □ Add □ Remove □ Change □ Add □ Remove □ Change □ Add □ Remove ☐ Remove ☐ Change; D Add

Page 2 of 3

□ Remove

☐ Change

If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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<u>lote:</u> If ocumen	date, if other than the date of filing:	as the
The 9	Oth day after the record is filed.	OI:
ated	8/26/16	
,	Batest Clina	
	Signature of a member or skilhorized representative of a member Deliento Amaya	198 91
	Typed or printed name of signes	Ţ.,
	Page 3 of 3	A C:
	Filing Fee: \$25.00	

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