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Certified Copies	_ Certificates	s of Status
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SECRETARY OF STRIP TALLAHASSEE FLORIO;

FILED

21119

COVER LETTER

TO: Registration So Division of Cor			
SUBJECT: <u>NEW</u>	Heights Re	Cal ESTATE In	vestments LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Brindley	Wright Name of Person	
	New Hergi	nts Real Estata	· Investments Li
	14900 SM	U30th Street 1	unit 277538
	Brentwich E-mail address	V FL 33027 City/State and Zip Code H 00 @ a mail to be used for future annual report notif	L. COM_ leation)
For further information e	oncerning this matter, please ca	all:	
Mame o	of Person	at (<u>365</u>) <u>43年著9</u> Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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)
MAII.	ING ADDRESS:	STREET/COURI	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 5/11/2015 and assigned Florida document number 1/5000 9000 5000 and assigned Florida document number 1/5000 9000 5000 and assigned Florida document number 1/5000 9000 5000 and assigned Florida document 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 new registered agent and/or the new registered office address here:

Name of New Registered Agent:

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 company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Note: If the d	e, if other than the date is listed, the date must blate inserted in this bloc Tective date on the Dep	k does not meet the	applicable statuto	THE OF THEORY CONTROL NO. OF	_ (optional) ays after filing.) ents, this date v	Pursuant to 605. vill not be liste	0207 (3 d as th
the record s _l) The 90th	pecifies a delayed day after the reco	effective date, bord is filed.	ut not an effec	tive time, at 1	2:01 a.m. d	on the earlie	r of:
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Filing Fee: \$25.00