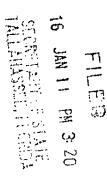
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JAN 12 2016 S. YOUNG

COVER LETTER:

	Registration Se Division of Cor			
SUBJEC	Anchor in F	Property Management, LLC		
		Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	<u> </u>	
		Freida V. Wheeler, EA		
	•		Name of Person	
		Stephen A. Macy, CPA, P.	A	
			Firm/Company	
		13770 58th St N, Ste 304		1860 18
			Address	
		Clearwater, FL 33760		
			City/State and Zip Code	工作 星
		fwheeler@macycpa.com		₩ ₩ N
For furth	er information co	e-mail address: (to be used for future annual report notifiall:	cation)
Freida V	V. Wheeler, EA		727 544-8875 x28	30
	Name o	f Person		Telephone Number
Enclosed	l is a check for th	ne following amount:		
\$25.0	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)
	MAIL	ING ADDRESS:	STREET/COURII	ER ADDRESS:

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

TO:

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 Liab) (A Flori	ility Compan da Limited L	sy as it now appears on our re ability Company)	cords.)
The Articles of Organization for this Limited Liability Florida document number L15000088990	Company v	were filed on 05/09/2015	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liabi	lity company here:	
Evolution Property Management, LLC			
The new name must be distinguishable and contain the words "Li	mited Liabili	ty Company," the designation "	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		3791-B Pompano Dr SE	
(Principal office address MUST BE A STREET ADD	RESS)	St Petersburg, FL 33705	
			· 产资 6
Enter new mailing address, if applicable:		PO Box 35317	AN TIL
(Mailing address MAY BE A POST OFFICE BOX)		St Petersburg, FL 33705	32 G)
			<u> </u>
B. If amending the registered agent and/or reg	istered of	fice address on our rec	
registered agent and/or the new registered office ad	dress here	:	
Name of New Registered Agent: Khri	isty Ferguso	n	ga
New Registered Office Address: 3791	l - B Pompa	no Dr SE	
		Enter Florida street ac	ddress
St Po	etersburg		, Florida <u>33705</u>
		City	Zip Code

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>	<u>Name</u>	Address	Type of Action
MGR	Khristy Ferguson		
		3791-B Pompano Dr SE	□ Remove
		St Petersburg, FL 33705	■ Change
			Add
			☐ Remove
			Change
			□ Add
			Remove Change
	ATTER Section - And Section -		————————————————————————————————————
			Remove
			□ Change
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ive date, if other than the date of filing:	(optional) ing or more than 90 days after filing.) Pursuant to 6
If the date inserted in this block does not meet the applicable statutorient's effective date on the Department of State's records.	ry filing requirements, this date will not be li
ion s effective date on the Department of State s records.	
cord specifies a delayed effective date, but not an effec	rtive time at 12:01 a.m. on the ear
90th day after the record is filed.	ctive time, at 12.01 a.m. on the ear
January 4 2016	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00