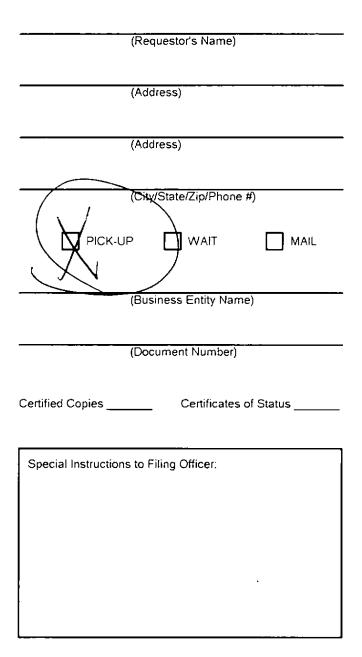
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TR. IIIN - 7 AMII: L.S.

J. HARRIE

COVER LETTER

	egistration Se vision of Cor						
SUBJECT	1215 S. Ad						
		Name of Limited Liability Company					
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please retur	n all correspo	indence concerning this matter	to the following:				
		Jack E. Kiker, III					
			Name of Person				
		WilliamsGautier Law					
	Firm/Company						
		2010 Delta Blvd.					
			Address				
		Tallahassee, Florida 32303	i				
		Jake.Kiker@WilliamsGauti	City/State and Zip Code				
			to be used for future annual report notific	cation)			
For further i	information ed	oncerning this matter, please ca	all;				
Jack E. Kik	er, III		850 386-3300				
Name of Person		Person	at () Area Code Daytime	Telephone Number			
Enclosed is	a check for th	e 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

The Articles of Organization for this Limited Liability Company were filed on 68/10/15 and assigned Florida document number 1.15000134723

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability Company," the designation "LLC" or the abbreviation "LLC"

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:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

_. Florida _

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>	<u>Address</u>	Type of Action
MGR	Widen Investments, LLC	914 Railroad Avenue	
		Tallahassee, Florida 32310	■ Remove
			☐ Change
MGR	Jack E. Kiker, III	222 Oakland Avenue	■ Add
		Tallahassee, Florida 32301	Remove
			Change
			Add
			□ Remove
			Change
			Remove Change
			A July Samuel
			Remove [1]
			Add
			Remove
			Change.

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Filing Fee: \$25.00