L15000170735

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(Business Entity Name)
(Document Number)
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	egistration Sec ivision of Corp			
CUBICCT	LANCO Sur	ntree, LLC		
SUBJECT	•	Name of Limi	ited Liability Company	
The enclos	ed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please retu	rn all correspo	ndence concerning this matter	to the following:	
		Tom Zack		
			Name of Person	
		LANCO Properties, LLC		
			Firm/Company	
		2101 Atlantic Street, Unit	514	
			Address	
		Melbourne Beach, FL 3295	51	
		t.zack@lanco.net	City/State and Zip Code	
		E-mail address: (to be used for future annual report notifi	cation)
For further	information co	oncerning this matter, please ca	all:	
Bradley F.	White, Esq.		321 727-8100 at ()	
	Name of	Person		Telephone Number
Enclosed is	s 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

FILED LANCO Suntree, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 2013 MAY 10 A 2: 15 The Articles of Organization for this Limited Liability Company were filed on 10/07/2015 zandassigned TATLAHASSEE FLORIDA Florida document number L15000170735 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: LANCO Realty, LLC 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 new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida ____ City

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>	Name	Address	Type of Action
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			☐ Add
			☐ Remove
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F. Conti	ve date if ather than the de	oto of filing:		(ontional)	
Note:	ve date, if other than the da extive date is listed, the date must be If the date inserted in this block ent's effective date on the Depa	c does not meet the app	licable statutory filing req	an 90 days after filing.) Pursuant to uirements, this date will not be	o 605.0207 (: listed as t
	ord specifies a delayed e 90th day after the record		not an effective time,	at 12:01 a.m. on the e.	arlier of
Dated_	MAY 6	. 20)	9.		
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Typed or printed name of signee

Filing Fee: \$25.00