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SECRETARY OF STATE
TALLIAMASSEE, FLORIDA

UAN OS 20.55 D. BRUCE

COVER LETTER

Divisio	on of Corpo	rations			
	W Real Esta	te Holdings LLC			
SUBJECT: _		Name of Limi	ted Liability Company		
The enclosed A	rticles of An	nendment and fee(s) are subr	mitted for filing.		
Please return al	l correspond	ence concerning this matter t	to the following:		
		Kyle D. Shoots			
			Name of Person		
		CW Real Estate Holdings I	LLC		
			Firm/Company		
		2911 Broadwing Avenue			
			Address		
		Panama City Florida 32405	5		
			City/State and Zip Code		
		kshoots@ssandeinc.com		≱ .,	N
	•	E-mail address: (t	o be used for future annual report notificatio	n) [[[]]	
For further info	rmation con	cerning this matter, please ca	ıll:	AR AS	7 - NAC 3818
Kyle D. Shoots	3		850 630-4788 at ()	100 100 100 100 100 100 100 100 100 100	_
Enclosed is a ch	Name of Pone	erson following amount:	Area Code Daytime Tele	phone Number	D :: 21
□ \$25.00 Filir		■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &

MAILING ADDRESS:

TO:

Registration Section

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

CW Real Estate Holdings LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ______12/16/2015 and assigned Florida document number L15000209040 This amendment 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: Enter Florida street address 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>	<u>Name</u>	Address	Type of Action
MGR	Kyle D. Shoots	2911 Broadwing Avenue	= Add
		Panama City Florida 32405	Remove
			Change
			Add
			Remove
			Change
			□ Remove
	·		Change
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	: .		Remove CC SS AND Change
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he 90th day after	the record is	filed.				idi idi⇔<	_	TE	
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Filing Fee: \$25.00

Typed or printed name of signee