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DIVISION OF CONFORMIONS

O SIMMONS

• COVER LETTER,

TO: Registration Section Division of Corporations	•	
SUBJECT: PJ Realty S Name of Limit	ervices llc ited Liability Company	
The enclosed Articles of Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Peggy J	Hankerson Name of Person	
PJ Real	ty Services	llc
372 Bay	inton Boy Cir	
Baynton	Beach 7 L 3	33435
Peggy. Hanke	rson 1 e gmail C	om_
For further information concerning this matter, please ca	ıll:	
Peggy J Hankerson Name of Person	at (56) 441.49 Area Code Daytime Tele	15 phone Number
Enclosed is a check for the 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

PJ Realty (Name of the Limited	Service Liability Company a	s it now app	ears on our records.)		
<u> </u>	Florida Limited Liabi	lity Company	y)		
The Articles of Organization for this Limited Lial Florida document number		e filed on _	2-1-14	2 and assigned	1
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liability	<u>company</u>	here:		
The new name must be distinguishable and contain the wor	ds "Limited Liability C	Company," th	e designation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applical	ole:		<u></u>	<u> </u>	
(Principal office address MUST BE A STREET	ADDRESS)			6 SI	
	_			EP 3	
				<u>ှင</u>	
Enter new mailing address, if applicable:					, , ,
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u> _			<u> </u>	
				10.85	
B. If amending the registered agent and/or the new registered offi		e address	on our records, <u>enter</u>	the name of th	<u>1e nev</u>
Name of New Registered Agent:	Peggy	7	Hankers	00_	
New Registered Office Address:		F /	Florida street address		
		Enter f	toriaa sireet aaaress		
		~.	, Florida		
		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 **Title** Name **Address Type of Action** Honkeson ☐ Change _□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change 16 SEP 3位 AM IS: I ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

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(If an ef Note:	ive date, if other than the date of filing:	suant to not be	605.020' listed as	7 (3)(t the
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	he ea	rlier o	f:
Dated	9/6/16			
	Peoply of Signature of a member or authorized representative of a member		-	
	Peccel T Hankerson			
	Typed or printed name of signee		-	

Page 3 of 3

Filing Fee: \$25.00