Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ARSENAULT & REARDON

Account Number: 075350000225

Phone : (727)584-1199

Fax Number

: (727)586-1071

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Marsenault @arsenault (awar p. com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ISLANDWAY RENTAL PROPERTIES, "LLC"

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25,00

Arsenault Law

Fax: 7275861071

Mar 2 2016 01:28pm

P002/005

COVER LETTER

TO:	Registration Sec Division of Corp						
SUBJE	Islandway Re	ental Properties, "LLC"					
SUBJE	C1:	Name of Lim	ited Liability Company				
The enc	losed Articles of A	mendment and fee(s) are sub-	mitted for filing.				
Please r	eturn all correspon	dence concerning this matter	to the following:				
		Kenneth G. Arsenault, Jr.					
			Name of Person				
		<u> </u>	Firm/Company				
			Address	-			
		Largo, FL 33771					
		City/State and Zip Code					
		karsenault@arsenaultlawgro	oup.com to be used for future annual report notific	notion)			
For furt	her information co	ncerning this matter, please ca		callony			
Kenneth G. Arsenault, Jr.			727 584-1199 at ()				
	Name of	Person	Area Code Daytime	Telephone Number			
Enclose	d is a check for the	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)			

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

War 2 2016 01:28pm P003/005

2016 MAR - 2 AM 9: 19

2016 MARY OF STATE

ORIGINAL ORI

Islandway Rental Properties, "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 Compa	any were filed on 02/07/2016	and assigned
Florida document number L16000033725		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	<u>iability company here</u> :	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	2	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	_ 	
B. If amending the registered agent and/or registered		s, enter the name of the new
registered agent and/or the new registered office address l	<u>nere</u> :	
Name of New Registered Agent:		
Name of New Regimered Agent.		
New Registered Office Address:		
	Enter Florida street addres	ss.
		orida
	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

Page 1 of 3

Arsenault Law Fax:7275861071 Mar 2 2016 01:28pm P004/005 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	Lance Hidalgo	1621 Gulf Blvd., #1204	Add
	· — — — — — — — — — — — — — — — — — — —	Clearwater, FL 33767	□ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
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ective date, if other than the effective date is listed, the date in this tet. If the date inserted in this	ust be specific an	d cannot be pri	or to date of fili	ig or more than 9	option Odays after fil	ing.) Pursuant t	to 605.0207
cument's effective date on the				y ming require	mons, ans d	ate will not be	c nated as
record specifies a delaye The 90th day after the re	ed effective cord is filed	date, but r	ot an effec	tive time, at	12:01 a.r	n. on the e	arlier of
		2016					
March 2		_					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00